Submit 1 Copy To Appropriate District Office	State of New Me		Form C- Revised August 1, 2	
$\begin{array}{llllllllllllllllllllllllllllllllllll$			WELL API NO.	
			30-025-283625. Indicate Type of Lease	
			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			N/A	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Nam South Hobbs (G/SA) Unit	ne
1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned			8. Well Number 159	
2. Name of Operator Occidental Permian Ltd.			9. OGRID Number: 157984	-
3. Address of Operator P.O. Box 4294, Houston, Tx 77210			10. Pool name or Wildcat: Hobbs (G/SA)	
4. Well Location (Surface)			10003 (0/3A)	
	5feet from the _North line			
Section 9	Township 19S	Range 38E	NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3596' (GL)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
	ENTION TO: PLUG AND ABANDON	SUB REMEDIAL WOR	SEQUENT REPORT OF:	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				
	n Andres formation	OTHER:		
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
1) MIRU PU. ND Wellhead. NU B				
2) Trip a bit and cleanout well to P	BTD	Duri	ng this procedure we plan to use	
 a) Drill out well to ±4431' (New TD) b) Log well from TD to ±3400' c) Log well from TD to ±3400' 				
5) Selectively perforate San Andres per logs tank and haul contents to the required				
7) Plugback OH pay to match offset injector disposal per ODC Rule 19.15.17				
 8) Set RBP at ±3900' and ±1000' and prepare well for wellhead change Following wellhead change: 9) MIRU PU' Pull plugs 				
9) MIRUPU; Pull plugs				
Following wellhead change: 9) MIRU PU; Pull plugs 10) RIH with ESP 11) ND BOP. NU Wellhead. RDMO PU. RTP Well Spud Date: Rig Release Date:				
		[WITH and My	K
Spud Date:	Rig Release Da	ite:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE				
Type or print name Jacob S. Cox E-mail address: Jacob Cox@oxy.com PHONE: 713-497-2053				
For State Use Only Marker & Report and Aplit				
APPROVED BY: A AND ADD TITLE ADD DATE 6/19/2018 Conditions of Approval (if any):				