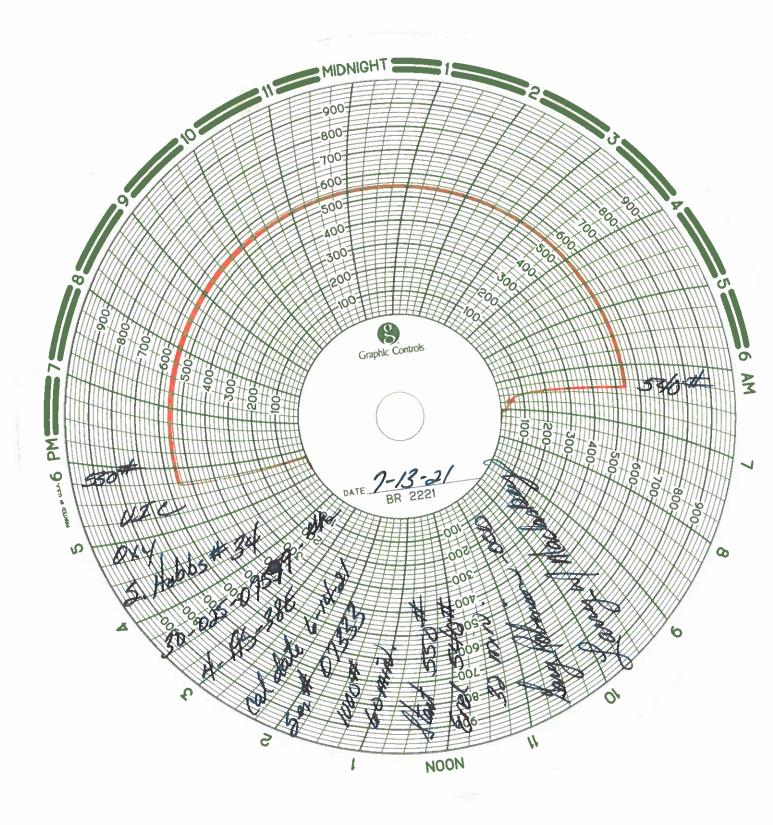
Finergy, Minerals and Natural Resources	ceived by COPG Po Appropriate Bistr	4:12 AM Sta	te of New Me	xico	Form C	age
MELL API NO.					Revised July 18,	2013
## SILS First St. Artenia. NM #\$210 DIC CONSELVENT AT TON DIVISION	1625 N. French Dr., Hobbs, NM 882	•••			WELL API NO.	
1. 1. 1. 1. 1. 1. 1. 1.		OIL CONS	SERVATION	DIVISION	5 Indicate Type of Lease	
Santa Fe, NM 87505 6. State Oil & Gas Lease No.	<u>District III</u> – (505) 334-6178	1220 \$	South St. Fran	cis Dr.		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEDERNO REPURD BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C. 19) FOR SUCH PROPOSALS). 1. Type of Well: Oil Well Gas Well Other NJECTOR 2. Name of Operator 9. OGRID Number 3. Address of Operator 10. Pool name or Wildcat 4. Well Location 10. Pool name or Wildcat 4. Well Location 11. Elevation (Show whether DR. RKB, RT. GR. etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPPOSITION ALTERING CASING COMMENCE DRILLING OPPOSITION ALTERING CASING COMMENCE DRILLING OPPOSITION ALTERING CASING CASING/CEMENT JOB DOWNHOLE COMMINGLE COSSED-LOOP SYSTEM OTHER: MIT THE COSSED-LOOP SYSTEM OTHER MIT THE COSSED-LOOP SYSTEM THE COSSED-LOOP SYSTEM OTHER MIT THE COSSED-LOOP SYSTEM THE COSSED-LOOP	<u>District IV</u> – (505) 476-3460	Sar	nta Fe, NM 87	505		
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2. Name of Operator 3. Address of Operator 4. Well Location Unit Letter Section Township Range III. Elevation (Show whether DR, RKB, RT, GR, etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS: PULL OR ALTER CASING MULTIPLE COMPL CLOSED-LOOP SYSTEM OTHER: MIT 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated diof starting any proposed work). SFE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Signature Rig Release Date: TITLE DATE Type or print name F-mail address: PHONE: PAPROVED BY: Accented for record - NMOCD, pr.6/1/2022 DATE		☐ Gas Well ☐ Oth	er INJECT	OR	8. Well Number	
4. Well Location Unit Letter : feet from the line and feet from the line Section Township Range NMPM County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK ADDITION TO: PERFORM REMEDIAL WORK ADDITION TO: PERFORM REMEDIAL WORK ADDITION AND ADDITION ADDITION AND ADDITION AND ADDITION AND ADDITION ADDI					9. OGRID Number	
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MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS,N.M. 88240 505-395-1016

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SIGNED: Adute

THIS IS TO CERTIFY THAT:

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720

District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. **Santa Fe, NM 87505**

CONDITIONS

Action 104341

CONDITIONS

Operator:	OGRID:
OCCIDENTAL PERMIAN LTD	157984
P.O. Box 4294	Action Number:
Houston, TX 772104294	104341
	Action Type:
	[C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	6/1/2022