Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

WELL API NO.

5. Indicate Type of Lease STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

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 Name

1. Type of Well: Oil Well ☐ Gas Well ☐ Other INJECTOR

8. Well Number

2. Name of Operator

9. OGRID Number

3. Address of Operator

10. Pool name or Wildcat

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:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
CLOSED-LOOP SYSTEM	☐						
OTHER:	☐			OTHER: 5 YEAR MIT			☐

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.

Spud Date: Rig Release Date:

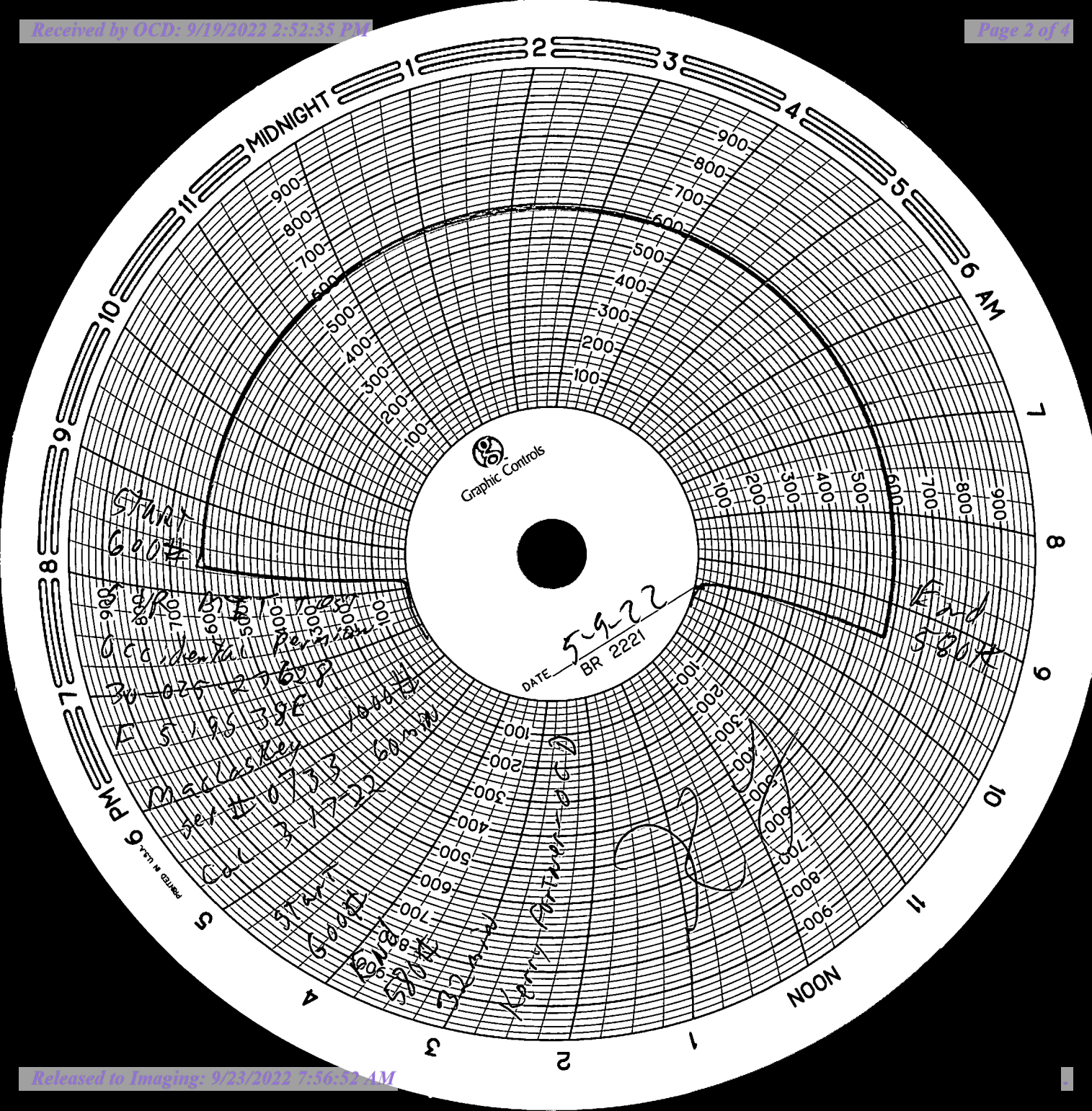
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE_____ TITLE_____DATE_____

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY:_____ Accepted for record – NMOCD gc 9/23/2022 _____DATE_____
Conditions of Approval (if any):



MACLASKEY
OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS,N.M. 88240
505-393-1016

THIS IS TO CERTIFY THAT: DATE 3-14-2022

I, Albert Rodriguez METER TECHNICAN FOR MACLASKEY OILFIELD SERVICES, INC. HAS ~~CHECKED THE CALIBRATION ON THE FOLLOWING~~ INSTRUMENT. 1000 PRESSURE RECORDER

SERIAL NUMBER
0733

TESTED AT THESE POINTS.

PRESSURE 500

TEST	AS FOUND	CORRECTED
0	100	—
100	200	—
200	300	—
300	400	—
400	500	—

PRESSURE 1000

TEST	AS FOUND	CORRECT
500	600	—
600	700	—
700	800	—
800	900	—
900	1000	—

REMARKS: _____

SIGNED: Albert Rodriguez

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
District IV
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 144635

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 144635
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	9/23/2022