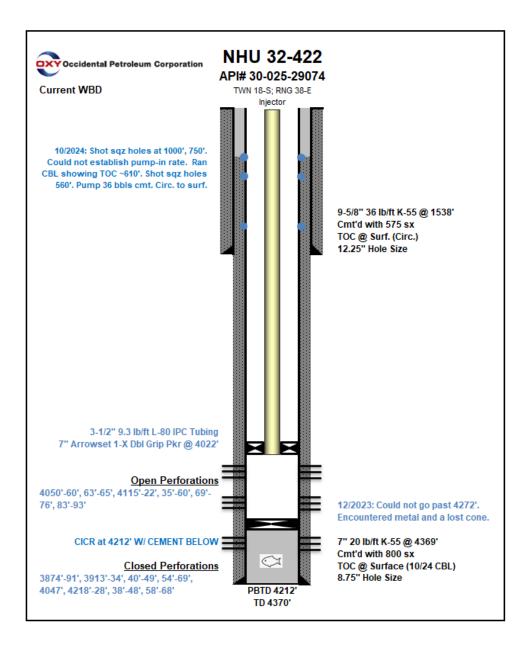
ceined by Och: Apple 1925 1:22:08 P	M State of New Mexico	Form C-103 ¹ of 5
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resou	WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISI	ON 30-025-29074
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		19520
SUNDRY NOTICE	ES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
· ·	LS TO DRILL OR TO DEEPEN OR PLUG BACK T TION FOR PERMIT" (FORM C-101) FOR SUCH	North Hobbs G/SA Unit
, <u> </u>	as Well Other Injection	8. Well Number 422
2. Name of Operator		9. OGRID Number
Occidental Permian LTD 3. Address of Operator		157984 10. Pool name or Wildcat
P.O. Box 4294 Houston, TX 772	HOBBS; GRAYBURG-SAN ANDRES	
4. Well Location	10 7237	
Unit Letter H :	1385 feet from the NORTH line	e andfeet from theEASTline
Section 32	Township 18S Range 38	8E NMPM County LEA
	11. Elevation (Show whether DR, RKB, RT, 8651' (DF)	(, GR, etc.)
12. Check Ap	propriate Box to Indicate Nature of	Notice, Report or Other Data
TEMPORARILY ABANDON	PLUG AND ABANDON REMEDICATION COMME	SUBSEQUENT REPORT OF: IAL WORK
13. Describe proposed or complet). SEE RULE 19.15.7.14 NMAC. For Mu	letails, and give pertinent dates, including estimated date altiple Completions: Attach wellbore diagram of
Objective: Repair cause of injector c	asing pressure. Return well to injection.	
Please see detailed planned procedu	re and current/proposed wellbore diagrams att	rached.
Spud Date:	Rig Release Date:	
I hereby certify that the information ab	ove is true and complete to the best of my k	knowledge and belief.
signature <u>Roni Ma</u>	thew TITLE Regulatory Ad	visorDATE 10/08/2025
Type or print name Roni Mathew For State Use Only	E-mail address: roni_m	nathew@oxy.com PHONE: (713) 215-7827
APPROVED BY:Conditions of Approval (if any):	TITLE	DATE

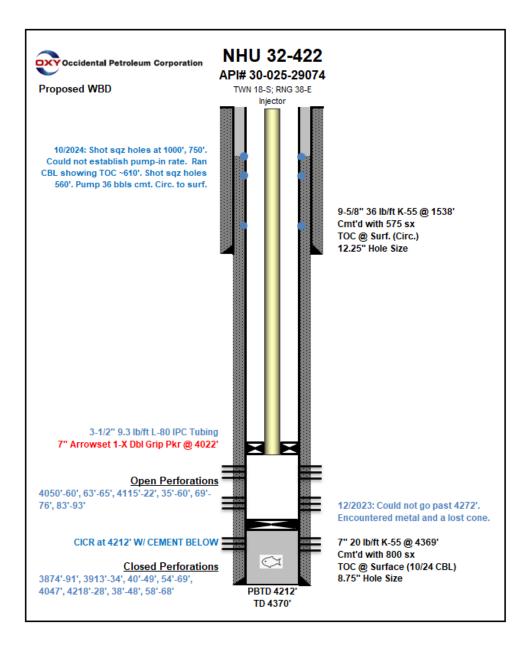
Objective:

Repair cause of injector casing pressure. Return well to injection.

Job Plan:

- MIRU PU.
- Kill well, ND WH NU BOP.
- Perform testing for cause of casing pressure.
- POOH with Injection Equipment.
- Run Injection Equipment. Perform MIT.
- RDMO PU.





Sante Fe Main Office Phone: (505) 476-3441

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

CONDITIONS

Action 513394

CONDITIONS

Operator:	OGRID:
OCCIDENTAL PERMIAN LTD	157984
P.O. Box 4294	Action Number:
Houston, TX 772104294	513394
	Action Type:
	[C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
anthony.harris	Post-workover MIT required with OCD witness.	10/27/2025
anthony.harris	Submit post-workover C-103 Subsequent report with updated wellbore diagram	10/27/2025
anthony.harris	By approval of this NOI, the previously approved NOI (Action ID 431294 - Approved 3-27-2025) is Void. If a Liner is required as part of the workover operation, a separate C-103 NOI approval will be required.	10/27/2025