

HOBBS OCD

MAY 23 2013

RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Ave., Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-07659
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
8. Well No. 84
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

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.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>TA'd Injector</u>
2. Name of Operator Occidental Permian Ltd.
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323
4. Well Location Unit Letter <u>I</u> : <u>1995</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>9</u> Township <u>19-S</u> Range <u>38-E</u> NMPM Lea County
11. Elevation (Show whether DF, RKB, RTGR, etc.) 3585' GL
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Casing Integrity Test</u> <input checked="" type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

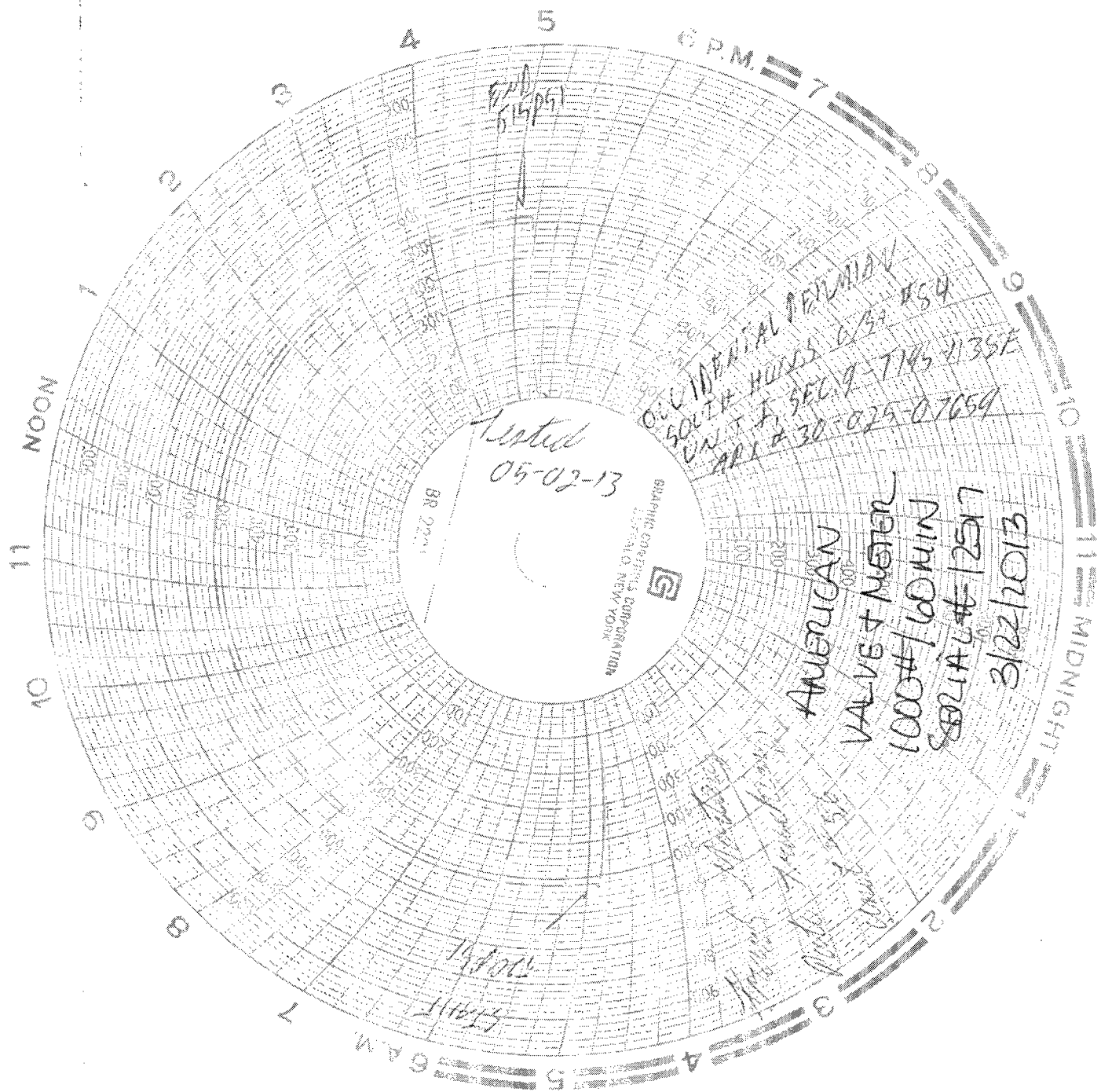
Date of Test: 05/02/2013
Pressure Readings: Initial - 520 PSI; 15 min - 515 PSI; 30 min - 515 PSI
Length of test: 30 minutes
Witnessed: NO

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE <u>Mendy A Johnson</u>	TITLE <u>Administrative Associate</u>	DATE <u>05/22/2013</u>
TYPE OR PRINT NAME <u>Mendy A Johnson</u>	E-mail address: <u>mendy_johnson@oxy.com</u>	TELEPHONE NO. <u>806-592-6280</u>
For State Use Only	APPROVED BY <u>[Signature]</u>	TITLE <u>Dist. Mgr</u> <u>5-23-2013</u>
CONDITIONS OF APPROVAL IF ANY:		

MAY 29 2013

[Handwritten signature]



CONFIDENTIAL
SOUTH HAVES 6/30/84
UNIT 1, SEC. 9-7143-1135E
APR 30 025-07659

AMERICAN
VALVE + MOTOR
1000# / 60 MIN
SERIAL # 12517
3/22/2013