

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

HOBBS CONSERVATION DIVISION

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

JUL 15 2013

RECEIVED

WELL API NO. 30-025-07603
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. 20
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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned	
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>D</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>3</u> Township <u>19-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3621' KB	
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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: TA wellbore/TA status request <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.

1. RUPU & RU.
2. RU wire line & perforate tubing @3912'. RD wire line.
3. ND wellhead/NU BOP.
4. POOH & lay down tubing and ESP equipment.
5. RIH w/CIBP set @3990'.
6. RIH w/packer set @3998'. Tested to 500 PSI. Tested OK. POOH w/packer.
7. RU wire line & dump bail 35' of cement on top of CIBP. Tag top of cement @3956'. RD wire line.
8. ND BOP/NU TA wellhead.
9. Test casing to 500 PSI for 30 minutes and chart for the NMOCD.
10. RDPU & RU. Clean location.
11. Well is TA'd.

RUPU 05/06/2013 RDPU 05/10/2013

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 NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 07/10/2013
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

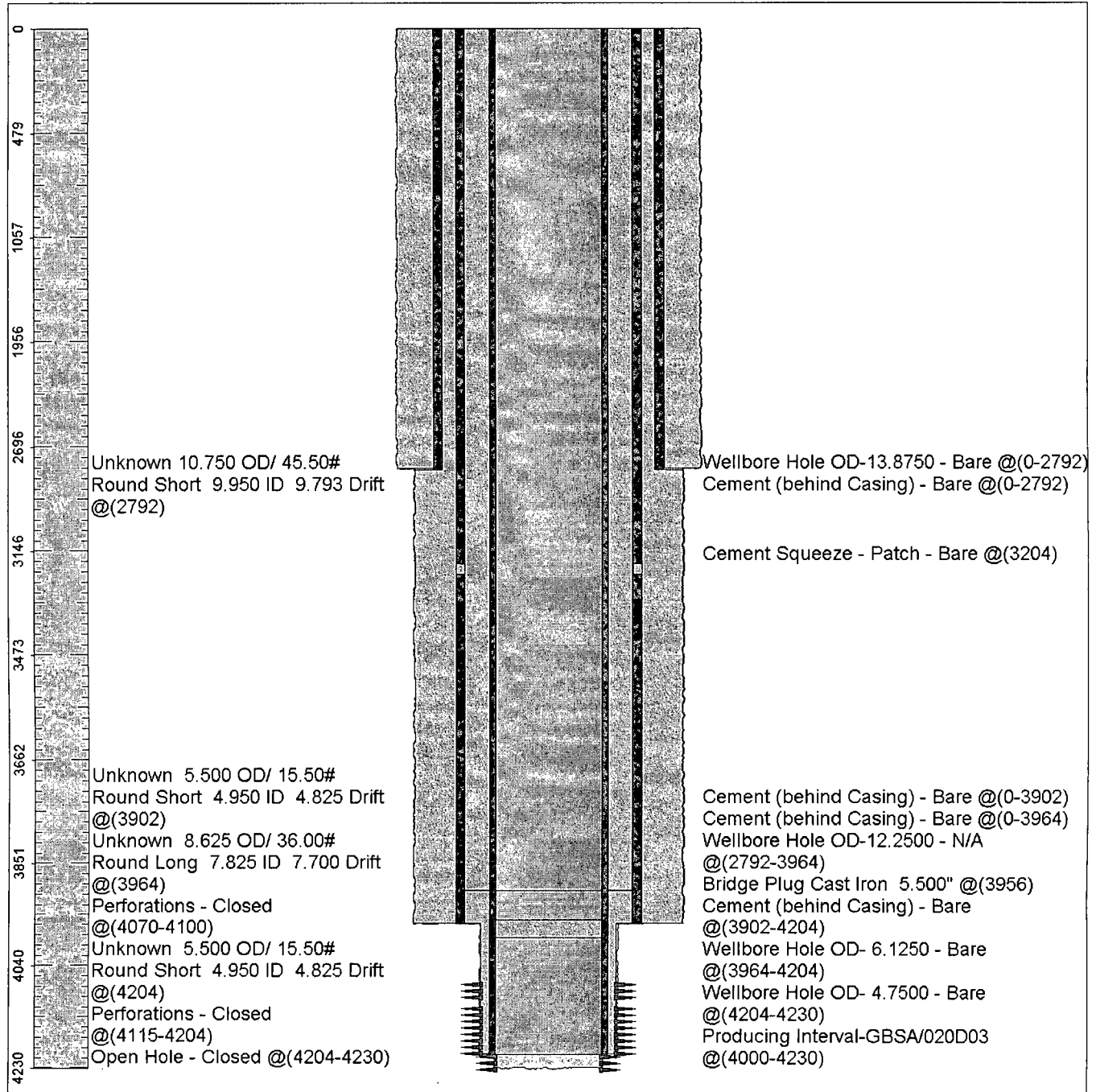
For State Use Only
APPROVED BY Maley Brown TITLE Compliance Officer DATE 7/23/2013
CONDITIONS OF APPROVAL IF ANY:

This Approval of Temporary
Abandonment Expires 7/17/2018

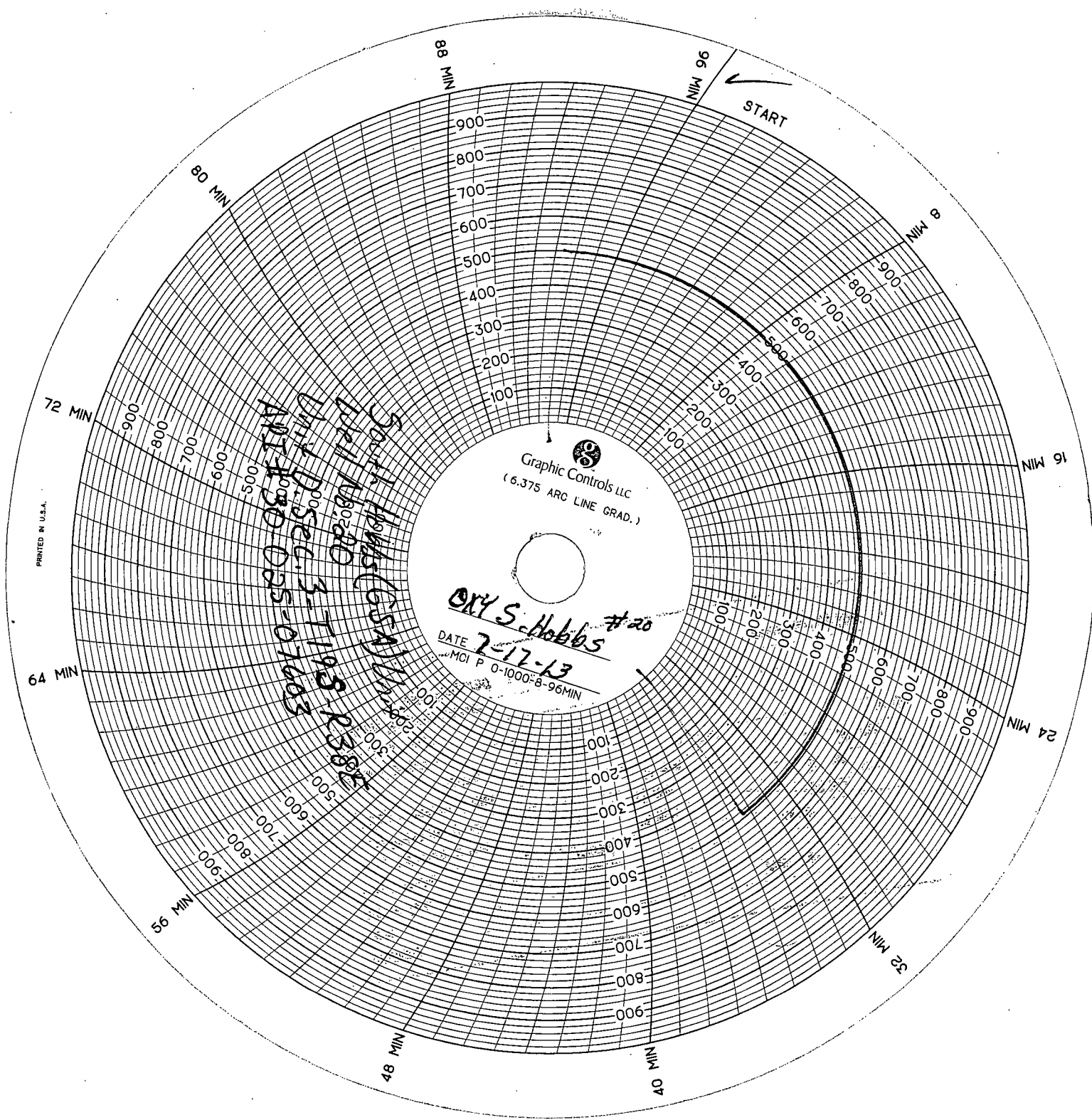
JUL 24 2013

June 20, 2013

Work Plan Report for Well:SHOU-20D03



Survey Viewer



PRINTED IN U.S.A.

Graphic Controls LLC
(6.375 ARC LINE GRAD.)

Oxy S. Hobbs #20

DATE 7-17-13

MCI P 0-1000-8-96MIN

South Hobbs (GSA) Unit 1
D. Sec. 3-T19S-R38E
AWT 130-025-07003

Company	OXY		Well No.	20
Lease	S. Hobbs			
Date of Test	7-17-13			
Packer: make	model	depth		
Tubing Pressure: 0 min	0	15 min	0	30 min
Casing Pressure: 0 min	500	15 min	455	30 min
Surf Cag Pressure: 0 min	0	15 min	0	30 min
1000	to spring	9.6	hr chart	96
Service Company:	Musclewhite			
Driver/Supervisor:	Freddie Soto			
Company Representatives:				
RRC Required:	Y <input checked="" type="checkbox"/>			
Witnessed by RRC				Y <input checked="" type="checkbox"/>