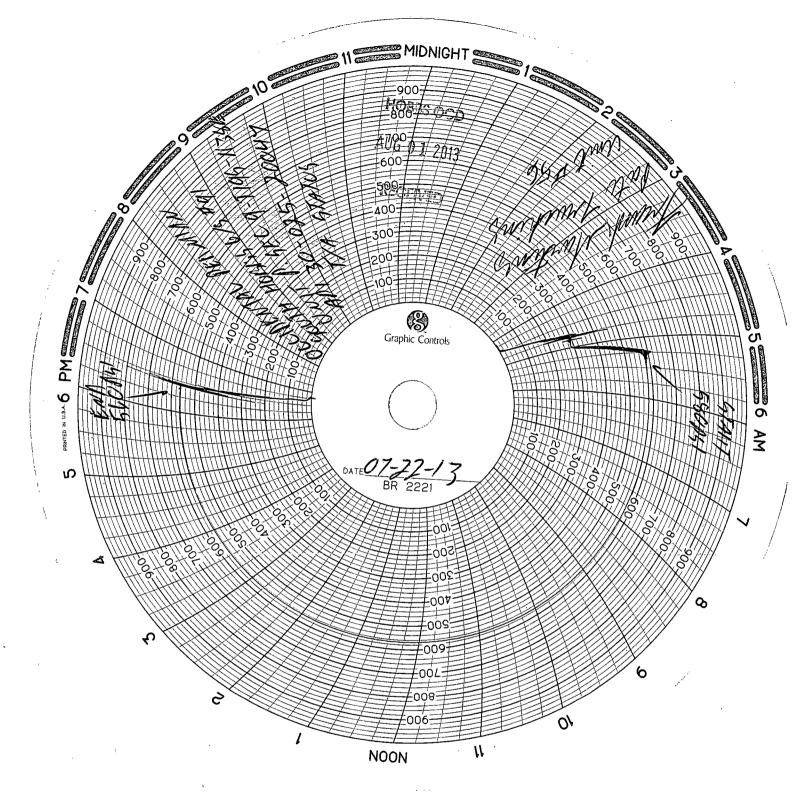
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-200

FILE IN TRIPLICATE	OBBS OCO CONSERVA	TION DIVISION	Revised 5-27-2004
DISTRICT I	1220 South 9	St. Francis Dr.	WELL API NO.
1625 N. French Dr. , Hobbs, NM 88240	0017	NM 87505	30-025-20047
DISTRICT II 1301 W. Grand Ave, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE X
DISTRICT III	RECEIVED		6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410	1/18 0 == -		
SUNDRY NOTIC	CES AND REPORTS ON WEL	LS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPE DIFFERENT RESERVOIR. USE "APPL			South Hobbs (G/SA) Unit
1. Type of Well:	/		8. Well No. 91
Oil Well	Gas Well Other Ter	mporarily Abandoned	
Name of Operator Occidental Permian Ltd.			9. OGRID No. 157984
3. Address of Operator			10. Pool name or Wildcat Hobbs (G/SA)
HCR I Box 90 Denver City, TX 79	9323		,
4. Well Location			
Unit Letter P : 990	Feet From The South	Feet	From The <u>East</u> Line
Section 9	Township 19-S	Range 38-E	NMPM Lea County
	11. Elevation (Show whether DF, RK, 3606' KB	B, RT GR, etc.)	
	3000 KB		
Pit or Below-grade Tank Application	or Closure		
Pit Type Depth of Ground Water Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness mil B	elow-Grade Tank: Volume	bbls; Construction Mat	rerial
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTEN			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
	CHANGE PLANS	COMMENCE DRILLING OPN	
	Multiple Completion	CASING TEST AND CEMEN	
OTHER:		OTHER: Casing integrit	
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: 07/22/2013		·	
Date of test. 0//22/2013			
Pressure readings: Initial – 580 PSI; 15 m	nin – 570 PSI; 30 min – 560 PSI		
Length of test: 30 mintues			
Witnessed: NO		This Approval	of Temporary 22 - 2014 Expires 22 - 2014
CIBP set @3962 Top perf @4056'		Abandonment	EXPIRES outcomes /-
I hereby certify that the information above is true	and complete to the best of my knowle	dge and belief. I further certify the	hat 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			
The second state of the se	, a general perilin	plan	ось-арріочец
SIGNATURE MINDLY T	Tohm	TITLE Administrative A	Associate DATE 07/31/2013
TYPE OR PRINT NAME Mendy A. Johns	son E-mail address:	mendy_johnson@oxy.com	TELEPHONE NO. 806-592-6280
For State Use Only		~ /	
APPROVED BY	geles .	TITLE DIST.	NGR DATE 8-7-2013
CONDITIONS OF APPROVAL IF ANY:	/		

AUG 07 2013



/