| State of New Mexico  |   |  |  |  |  |
|--|---|--|--|--|--|
| State of New Mexico<br>HOBBS @@gy, Minerals and Natural Resources Department   | Form C-103  |  |  |  |  |
|  | Revised 5-27-2004                                 |  |  |  |  |
| FILE IN TRIPLICATE OIL CONSERVATION DIVISION   |   |  |  |  |  |
| DISTRICT I<br>1625 N. French Dr., Hobbs, NM 88240<br>APR 0 4 2014<br>1220 South St. Francis Dr.<br>Santa Fe, NM 87505  | WELL API NO.<br>30-025-07668                      |  |  |  |  |
| DISTRICT II  | 5. Indicate Type of Lease                         |  |  |  |  |
| 1301 W. Grand Ave, Artesia, NM 88210 <b>RECEIVED</b>   | STATE FEE X                                       |  |  |  |  |
| DISTRICT III   | 6. State Oil & Gas Lease No.                      |  |  |  |  |
| 1000 Rio Brazos Rd, Aztec, NM 87410  | 7. Lease Name or Unit Agreement Name              |  |  |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  | J   |  |  |  |  |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.) | South Hobbs (G/SA) Unit<br>Section 9              |  |  |  |  |
| 1. Type of Well:   | 8. Well No. 83                                    |  |  |  |  |
| Oil Well Gas Well Other Temporarily Abandoned  |   |  |  |  |  |
| 2. Name of Operator  | 9. OGRID No. 157984                               |  |  |  |  |
| Occidental Permian Ltd.  |   |  |  |  |  |
| 3. Address of Operator<br>HCR 1 Box 90 Denver City, TX 79323   | 10. Pool name or Wildcat Hobbs (G/SA)             |  |  |  |  |
| 4. Well Location   |   |  |  |  |  |
| Unit Letter J : 1980 Feet From The South 1980 Fee  | t From The East Line                              |  |  |  |  |
| Section 9 Township 19-S Range 38-F   | E NMPM Lea County                                 |  |  |  |  |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.)  |   |  |  |  |  |
| 3600' GL   |   |  |  |  |  |
| 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 Below-Grade Tank: Volume bbls; Construction Ma   |   |  |  |  |  |
|  |   |  |  |  |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report, or C<br>NOTICE OF INTENTION TO: SUBS   | Other Data SEQUENT REPORT OF:                     |  |  |  |  |
|  |   |  |  |  |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK   |   |  |  |  |  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PLUG & ABANDONMENT   |   |  |  |  |  |
| PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB  |   |  |  |  |  |
| OTHER: TA status extension request YEAR OTHER:   |   |  |  |  |  |
| 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.  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
| Run MI test to gain extension on temporary abandoned status.   |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
| 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   |   |  |  |  |  |
| Mard TONG and  |   |  |  |  |  |
| SIGNATURE  | Associate DATE 04/03/2014                         |  |  |  |  |
| TYPE OR PRINT NAME Mendy A. Johnson () E-mail address: <u>mendy_johnson@oxy.com</u>  | TELEPHONE NO. 806-592-6280                        |  |  |  |  |
| For State Use Only   |   |  |  |  |  |

| TYPE OR PRINT NAME | Mendy A. Johnson | E-mail address: | mendy_johnson@oxy.com | TELEPHONE NO.         | 806-592-6280 |
|--------------------|------------------|-----------------|-----------------------|-----------------------|--------------|
| For State Use Only | ALIF MY:         | on              | TITLE Complian        | <u>ce Office</u> oste | 4/4/2014     |

APR 07 2014