State of New Mexico Energy, Minerals and Natural Resources Department •

Energy, Minerals and Natural Resources Department Form C-103	
FILE IN TRIPLICATE <u>DISTRICT I</u> HOBBS OCO IL CONSERVATION DIVISION 1220 South St. Francis Dr.	Revised 5-27-2004
1625 N. French Dr., Hobbs, NM 88240	30-025-07641
DISTRICT II 1301 W. Grand Ave, Artesia, NM 88210 DISTRICT III	5. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210 • • • DISTRICT III	STATE X FEE
1000 Rio Brazos Rd, Aztec, NM 87410 <b>RECEIVED</b>	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	South Hobbs (G/SA) Unit Section 6
I. Type of Well:	8. Well No. 26
Oil Well Gas Well Other Temporarily Abandoned	
2. Name of Operator Occidental Permian Ltd.	9. OGRID No. 157984
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	10. Pool name or Wildcat Hobbs (G/SA)
4. Well Location	
Unit Letter H : 1650 Feet From The North 480 Fee	et From The East Line
Section 6 Township 19-S Range 38-	E NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3611' RDB	
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 Thicknessmil       Below-Grade Tank: Volumebbls; Construction Material	
12.       Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP	
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMEN	
OTHER: OTHER: OTHER: Casing integr	ty test/TA status request X
<ol> <li>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.</li> </ol>	
Date of test: 04/11/2014	
Pressure readings: Initial – 552 PSI; 15 min – 525 PSI; 30 min – 525 PSI	
Length of test: 30 minutes	
Witnessed: No	
CIBP set @3848' This Ar	oproval of Temporary
Top perf @3942' Aband	onment Expires 7/11/2013
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 MUNACY CLORAND TITLE Administrative Associate DATE 04/17/2014	
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280	
APPROVED BY MALENSTOWN TITLE Dist. Supervisor Date 4/22/2014	
APR 2 2 2014	

