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

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE  HOBBS OCHL CONSERVATION DIVISION  1220 South St. Francis Dr.	Revised 3-27-2004
1625 N. French Dr., Hobbs, NM 88240  Santa Fe NM 87505	WELL API NO. 30-025-07658
DISTRICT II APR 2 2 2014	5. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210 DISTRICT III	STATE FEE X  6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410 RECEIVED	
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 9
I. Type of Well:  Oil Well Gas Well Other Temporarily Abandoned	8. Well No. 62
2. Name of Operator	9. OGRID No. 157984
Occidental Permian Ltd. / 3. Address of Operator	10. Pool name or Wildcat Hobbs (G/SA)
HCR I Box 90 Denver City, TX 79323	110001 (0,011)
4. Well Location	
Unit Letter D : 660 Feet From The North 660	Feet From The West Line
Section 9 Township 19-S Range 3	8-E NMPM Lea County
3604' DF	
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 Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:    SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS. PLUG & ABANDONMENT
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEM	MENT JOB
OTHER: Casing into	egrity test/TA status request
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: 04/12/2014	
Pressure readings: Initial – 540 PSI; 15 min – 540 PSI; 30 min – 540 PSI	
Length of test: 30 minutes	
	pproval of Temporary
CIBP set @3860' Top perf @3955'	donment Expires 4/12/2013
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	
The day of the seal plan	
	ive Associate DATE 04/17/2014
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy johnson@oxy.c	com TELEPHONE NO. 806-592-6280
APPROVED BY TITLE DIST.	Supervisor DATE 4/22/2014
CONDITIONS OF APPROVAL IF ANY:	, ,
	11114
	MPR 22 2014

