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

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVATION DIVISION	Revised 5-27-2004
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505HOBBS OCE	WELL API NO. 30-025-28304
<u>DISTRICT II</u>	Samare, TWI 87505-15-15-15	5. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210	JUL <b>16</b> 2014	STATE X FEE
<u>DISTRICT III</u>	JOL 1 0 201	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410		
	TICES AND REPORTS ON WELLS RECEIVED	7. Lease Name or Unit Agreement Name
· · · · · · · · · · · · · · · · · · ·	ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	South Hobbs (G/SA) Unit
1. Type of Well:	FFEICATION FOR FERMIT (FOILITE-TOT) for such proposals.)	Section 6  8. Well No. COOP 1
Oil Well	Gas Well Other Temporarily Abandoned	COOP 1
2. Name of Operator	Temporarn) Troundoned	9. OGRID No. 157984
Occidental Permian Ltd.	/	
3. Address of Operator	. H0000	10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX  4. Well Location	79323	
	Fort From The North	T Ti
Unit Letter B : 200	Feet From The North 1380 Feet	t From The <u>East</u> Line
Section 6	Township 19-S Range 38-E	NMPM Lea County
	11. Elevation (Show whether DF, RKB, RT GR, etc.)	
	3627' GL	
Pit or Below-grade Tank Application	or Closure	
Pit Type Depth of Ground	d Water Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness mil	Below-Grade Tank: Volume bbls; Construction Mat	<del></del>
r'.		
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 OPN	NS. PLUG & ABANDONMENT
PULL OR-ALTER CASING	Multiple Completion CASING TEST AND CEMEN	
OTHER: TA extension status requ	est YK. X 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 temp	orary abandoned status.	
		·
I hereby certify that the information above is	true and complete to the best of my knowledge and belief. I further certify t	hat any nit or below-grade tank has been/will be
constructed or	The and complete to the cook of my knowledge and conell. I failule contribute	and any proof octors grade tank has occur with oc
closed according to NMOCD guidelines		OCD-approved
· m.	plan	
SIGNATURE / / Undy	Administrative A	Associate DATE 07/15/2014
TYPE OR PRINT NAME Mendy A	ohnson E-mail address: mendy_johnson@oxy.com	TELEPHONE NO. 806-592-6280
For State Use Only		
APPROVED BY	Drawn TITLE Dest. S	DATE 7/17/2014
CONDITIONS OF APPROVAL IF ANY:	11122	The same of the sa
COMPITIONS OF MITROVAL II ANH.		

JUL 1 7 2014/