Submit 1 Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised August 1, 2011			
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, minerals and rate	WELL API NO.				
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION	I DIVISION	30-025-28335 5. Indicate Type of Lease	•		
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fran			FEE 🛛 🖌		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 8'	7505	6. State Oil & Gas Lease			
	ICES AND REPORTS ON WELLS	5	7. Lease Name or Unit A	Agreement Name		
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	South Hobbs (G/SA) Uni Section 4	it				
1. Type of Well: Oil Well	Gas Well 🗌 Other:	BBS OCD	8. Well Number: 131			
2. Name of Operator Occidental Permian Ltd.		010010	9. OGRID Number: 157	984		
3. Address of Operator		AR 21 2016	10. Pool name or Wildca	at Hobbs (G/SA)		
HCR 1 Box 90 Denver City, TX 79	9323	CENTO				
4. Well Location	K	CEIView				
Unit LetterG1	383feet from theNorthli	ne and2498	feet from theEast	_line		
Section 4	Township 19S	Range 38E	NMPM Lea	County		
A DECEMBER OF THE SECOND	11. Elevation (Show whether DR	R, RKB, RT, GR, etc.				
	3617.3' (GL)					
12 Check	Appropriate Box to Indicate N	Jature of Notice	Report or Other Data			
12. Check A	Appropriate Box to indicate N	valuie of ivolice,	Report of Other Data			
	TENTION TO: PLUG AND ABANDON	SUB	SEQUENT REPORT			
PERFORM REMEDIAL WORK						
		COMMENCE DR		DA 🗌		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	I JOB			
OTHER:		OTHER:				
	oleted operations. (Clearly state all					
of starting any proposed we proposed completion or rec	ork). SEE RULE 19.15.7.14 NMA	C. For Multiple Con	mpletions: Attach wellbore	diagram of		
proposed completion of ree	Joinpietion.					
1. MIRU PU		During this	procedure we plan to	use		
2. POOH w/ Prod Equipment	loop system with a steel					
 Set CIBP @ 4012' and cap with Install TA wellhead 	135° 01 CM1	tank and h	aul contents to the required			
5 RDMO PU	and a fight of the second	disposal ne	er ODC Rule 19.15.17			
Conditio	n of Approval: notify	uisposai po				
OCD H	lobbs office 24 hours					
Spud Date: prior of ru	nning MIT Test & Chart Rig Release Da	ate:				
		Y The result	month to the se			
		10 00000 20	The state of the	102 12 5 L		
I hereby certify that the information	above is true and complete to the b	est of my knowledg	e and belief.			
	\mathbf{i}					
SIGNATURE / eng A. L		DA′	TE3/15/16			
Type or print name _Terry A. Dunca For State Use Only				1		
APPROVED BY:	Brown TITLE Di	st Super	VISOU DATE	3/21/2016		
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