

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

Revised August 1, 2011

HOBBS
FEB 28 2017
RECEIVED

CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-28332
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
8. Well Number 128
9. OGRID Number: 157984
10. Pool name or Wildcat: Hobbs (G/SA)

SUNDRY NOTICES AND REPORTS ON WELLS (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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other: Injector - CO2/Water <input checked="" type="checkbox"/>	
2. Name of Operator Occidental Permian Ltd.	
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	
4. Well Location (Surface) Unit Letter <u>D</u> : <u>335</u> feet from the <u>North</u> line and <u>520</u> feet from the <u>West</u> line Section <u>3</u> Township <u>19S</u> Range <u>38E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3630' (KB)	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input checked="" type="checkbox"/> Injector Conformance		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 1) MIRU PU. ND Wellhead. NU BOP.
- 2) PB OH section w/ 500 sx Class C cement
- 3) Test previously squeezed intervals and verify which zones need to be reperforated
- 4) Perforate potentially squeezed interval from 4132'-4380' as needed
- 5) AT w/ ± 30 gal/ft 15% HCL.
- 6) RIH w/ injection equipment and set bottom packer at $\pm 4122'$ and top packer at 3941'
- 7) Circulate packer fluid and perform MIT
- 8) ND BOP. NU Wellhead.

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal per ODC Rule 19.15.17

Condition of Approval: notify

OCD Hobbs office 24 hours

prior of running MIT Test & Chart

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jacob A Cox TITLE Production Engineer DATE 2/28/2017

Type or print name Jacob S. Cox E-mail address: Jacob Cox@oxy.com PHONE: 713-497-2053

APPROVED BY: Mary S Brown TITLE AO/II DATE 2/28/2017

Conditions of Approval (if any):

MB