Submit 1 Copy To Appropriate District	State of New Me	exico		Form C-103
Office <u>District I</u> – (575) 393-6161 Energy	, Minerals and Natu	aral Resources		evised August 1, 2011
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	D		WELL API NO. 30-025-28340	
011 C Einst Ct Antonio NIX/00010		DIVISION	5. Indicate Type of Lea	ise
District III – (505) 334-6178 SEP 19 2017 20 South St. Francis Dr. District IV – (505) 476-3460 Santa Fe, NM 87505			STATE	FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Leas	se No.
SUNDRY NOTICES AND RI			7. Lease Name or Unit	
(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			South Hobbs (G/SA)	Unit
PROPOSALS.)			8. Well Number 137	
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			9. OGRID Number: 15	7094
Occidental Permian Ltd.	9. OOKID Number: 15	/904		
3. Address of Operator			10. Pool name or Wildo	cat
1017 West Stanolind Road Hobbs, New Me	xico 88240		Hobbs (G/SA)	
4. Well Location				
Unit LetterI2458feet from				_line
Section 4 Township	U U		The second se	County
	on (Show whether DR	, RKB, RT, GR, etc.		
3625' KB				
12. Check Appropriate H	Box to Indicate Na	ature of Notice, F	Report or Other Data	
NOTICE OF INTENTION	TO	SUB	SEQUENT REPOR	TOF
PERFORM REMEDIAL WORK V PLUG AND ABANDON REMEDIAL WORK				
TEMPORARILY ABANDON		COMMENCE DRI	LLING OPNS. PAN	DA 🗌
PULL OR ALTER CASING MULTIPLE	COMPL	CASING/CEMEN	Т ЈОВ	
OTHER:		OTHER:		
13. Describe proposed or completed operation	s. (Clearly state all p	and the second se	give pertinent dates, inclu	ding estimated date
of starting any proposed work). SEE RUL	E 19.15.7.14 NMAC	. For Multiple Com	pletions: Attach wellbore	diagram of
proposed completion or recompletion.				
1 DUDU I DOOU W/ESD conternant		During th	is procedure we plan to us	se the closed-
			em with a steel tank and h	
			ed disposal per ODC Rul	le 19.15.17
4. RDPU and clean location				
5.				
Spud Date:	Rig Release Dat	te:		
		L		
I hereby certify that the information above is true ar	nd complete to the be	st of my knowledge	and belief	
Thereby certify that the information above is the al	la complete to the bes	st of my knowledge	and benef.	
SIGNATURE <i>Ierry a. Duncan_</i>	TITLE V	VAIIS	DATE 9/19/2017	
SIGNATORE	IIILL V		_DAIL	
Type or print name Terry Duncan	E-mail address t	erry_a_duncan@ox	y.com_PHONE: 575 3	97-8223
For State Use Only		An ITT		2 listano
APPROVED BY: ALUSA	OWTIFE	AU/11	DATE	119/2011
Conditions of Approval (if any):			DATL	1 1
U				
				M