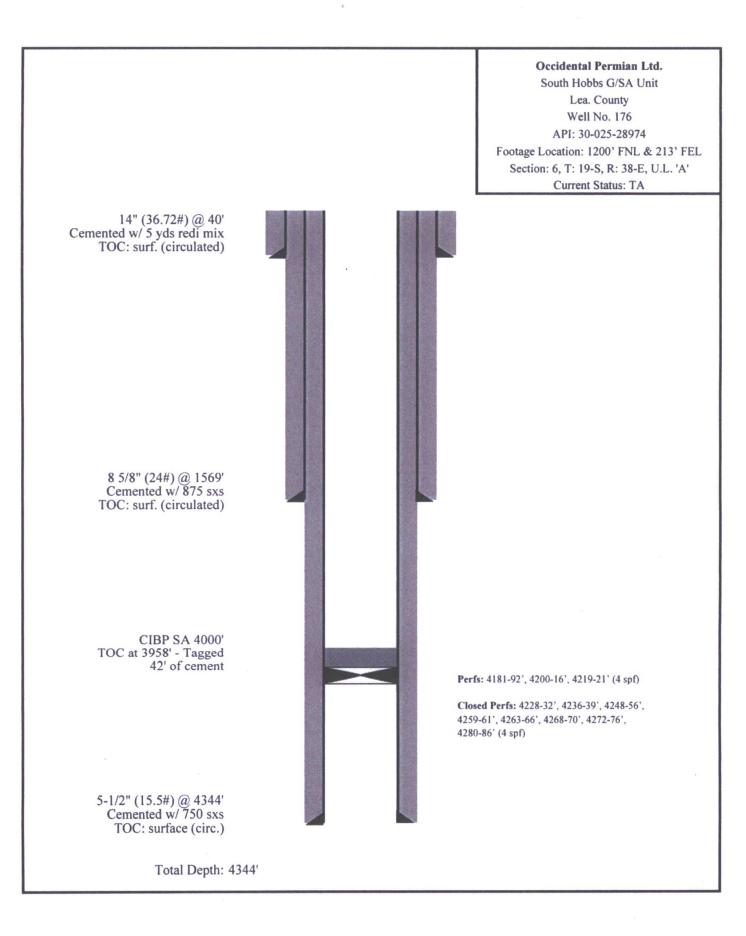
Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
	Revised July 18, 2013 WELL API NO.
District I – (575) 393-6161 1625 N. French D. C.	30-025-28974
	5. Indicate Type of Lease
1000 Rio Brazos Rd., And R7410 Sonto Ec. NIM 87505	6. State Oil & Gas Lease No.
District IV - (505) 476-3460 1220 S. St. Francis Dr. Satt FEIVED 87505	6. State Oli & Gas Lease No.
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7 Long Nome of Linit A measuret Nome
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	South Hobbs (G/SA) Unit
1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned	8. Well Number 176
2. Name of Operator Occidental Permian, Ltd	9. OGRID Number 157984
3. Address of Operator	10. Pool name or Wildcat
HCR 1 Box 90 Denver City, TX 79323	Hobbs (G/SA)
4. Well Location	
Unit Letter A : 1200 feet from the North line and 21	
Section 6 Township 19-S Range 38-E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3622' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK DULUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
CLOSED-LOOP SYSTEM	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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
Date of test: 08/17/2017	
Pressure readings: Initial - 600 PSI Ending - 580 PSI Length of test: 32 minutes	
Witnessed: YES - Kerry Fortner - NMOCD	
Bur	
This Approval of Temporary 12019	
Abandonment Exp	nires_O/1/2017
	/ /
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
ma a A Cak	
SIGNATURE DATE 09/21/2017	
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280	
Type or print name Mendy A. Johnson E-mail address: Mendy_Johnson@oxy.com PHONE: 806-592-6280 For State Use Only	
APPROVED BY: Kenny Fortner TITLE Compliance OFFicer DATE 9-28-17	
Conditions of Approval (if any):	



Printed 9/7/2017

