	Dillie of fier Michieu		Form C-103 Revised August 1, 2011	
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 NOV 2 PIL CONSERVATION DIVISION			WELL API NO.	
			30-025-07537	_ ′
District 111 - (505) 334-6178 NOV 2 1 201220 South St. Francis Dr.			5. Indicate Type of Lease  STATE   FEE   □	-
1000 RIO Brazos Rd., Aziec, NM 8/410 Santa Fe NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED 87505				
SUNDRY NOTICES AND REPORTS ON WELLS (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.)			North Hobbs G/SA	
1. Type of Well: Oil Well Gas Well Other TNJ50110N			8. Well Number 32-431	-
Name of Operator     Occidental Permian Ltd.			9. OGRID Number: 157984	
3. Address of Operator			10. Pool name or Wildcat Hobbs (G/SA	)
HCR 1 Box 90 Denver City, TX 79323				
4. Well Location				
Unit LetterI_:2310feet from theSouthline and330feet from theEastline				
Section 32 Township 18S Range 38E			NMPM Lea County	
3636' GL		, , , , , , , , , , , , , , , , , , ,		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK				_
TEMPORARILY ABANDON			=	_
DOWNHOLE COMMINGLE				
OTHER: December Add Red and Acidiza		OTHER:	-	7
OTHER: Deepen, Add Perf and Acidize    OTHER:   OTHER:				
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of				
proposed completion or recompletion.				
1) DOVAL with injection aurisment		During	this procedure we plan to use	
1) POOH with injection equipment Durin 2) Clean out to PBTD 4210' the cl			osed-loop system with a steel	
3) Deepen well hore open hole from 4225' to 4270'			and haul contents to the required	
4) Perf 4230'- 4238' at 4 JSPF 5) Acidize OH and new perfs (4230'-38') with 15% HCl and Rock Salt disposal per ODC Rule 19.15.17				
6) Change out wellhead				
7) RIH with injection equipment 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.				
1				
SIGNATURE DATE 11/16/17				
Type or print name Alison Cramer E-mail address: alison_cramer@oxy.com PHONE: 713-840-3024				
APPROVED BY Maley & Brown FITLE AD/II DATE 11/21/2017				
APPROVED BY: // Aley & Ducum File AO/II DATE 11/21/2017 Conditions of Approval (Pany)				