

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 July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Hobbs, NM 87505
 Santa Fe, NM 87505
HOBBS OCD
MAY 22 2019

WELL API NO. 30-025-26975
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
8. Well Number 222
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3647' GL

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR RE-ENTER TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other Injector

2. Name of Operator
Occidental Permian LTD

3. Address of Operator
PO Box 4294 Houston, TX 77210

4. Well Location
Unit Letter F : 1520 feet from the N line and 1470 feet from the W line
Section 33 Township 18S Range 38E NMPM County Lea

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 checked="" 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		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.

6/19/18: MIRU x NDWH x NUBOP. POOH 2 7/8" tbg x injection equipment. 6/20/18: Ran USIT log from 3957' up to surface.
 6/21/18: RIH 5 1/2" test pkr, isolated csg leak 10" from surface, RIH 5 1/2" rpb @6980'. Dumped 2 sxs sand on top of rpb.
 RD x NDBOP x NUWH. ***WELL SUSPENDED RIGLESS WELL HEAD CHANGE***

7/9/18: MIRU x NDWH x NUBOP. Washed off sand from rbp x POOH. 7/10/18: Released inj pkr x RIH 4 3/4" bit x tagged @4185 where cibp was. Drilled on cibp x pushed it down to 4387'. 7/11/18: Shot perms 4206' - 4304' 36 holes. Ran acid job w/ 3000 gals 15% IC200 HCL x flushed csg. 7/12/18: Ran 2nd setting acid job w/ 800 gals 15% IC200 HCL x flushed csg. RIH 5 1/2" AS1-X inj pkr @3965' x tested inj pkr to 600 psi, held ok. 7/13/18: RIH 120 jts 2 7/8" tbg @3957' x on/off tool. Ran MIT - chart attached.
 RD x NDBOP x NUWH.

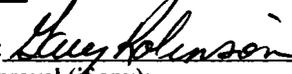
Spud Date: 6/19/2018 Rig Release Date: 7/9/2018

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

SIGNATURE  TITLE Regulatory Specialist DATE 05/07/2019

Type or print name April Hood E-mail address: April_Hood@Oxy.com PHONE: 713-366-5771

For State Use Only

APPROVED BY:  TITLE Compliance Officer DATE 5-23-19
 Conditions of Approval (if any):

