Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office // District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-025-28353
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5 Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. OCD	STATE FEE
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	111 01 201	3.
SUNDRY NOT	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCHEIVED	
1. Type of Well: Oil Well	Gas Well Other	8. Well Number 150
2. Name of Operator		9. OGRID Number: 157984
Occidental Permian Ltd.		10. Deal come of Wildow Habba (C/CA)
3. Address of Operator 2611 Plains Hwy Denver City,	TV 70222	10. Pool name or Wildcat Hobbs (G/SA) Wildcat; Tubb; Drinkard; Abo
4. Well Location	1X /9323	Wildeat, Tubb, Dillikard, Abb
1	130 feet from the North line and 122	20 feet from theWest line
Section 10		
Section 10	Township 19S Range 38	
	3622' KB	etc.)
12. Check A	Appropriate Box to Indicate Nature of Not	ice, Report or Other Data
NOTICE OF IN	NTENTION TO:	SUBSEQUENT REPORT OF:
— <u> </u>		VORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	. et	EDRILLING OPNS. P AND A
PÚLL OR ALTER CASING	MULTIPLE COMPL CASING/CEI	MENT JOB
DOWNHOLE COMMINGLE	·	
OTHER:	□ OTHER:	
13. Describe proposed or comp	pleted operations. (Clearly state all pertinent detail	s, and give pertinent dates, including estimated date c Completions. Attach wellbore diagram of
	ork). SEE RULE 19.15.7.14 NMAC. For Multiple	e Completions. Attach Wellbore diagram of
proposed completion or rec	sompletion. Set C	IBP, RBP or Packer within 100 feet of uppermost
	<b>perfs</b> or c	pen hole Pressure test to 500 psi for 30 minutes with
1) POOH with prod equip.	A/A	pressure drop of not greater than 10% over a
2) Clean out to 1100	•	30 minute period
3) Set CIBP at 4020. Cap wi	th 35' of cmt.	•••
<ul><li>4) Run MIT</li><li>5) Well is TA</li></ul>		
3) Well 13 171		
<b></b>		
The Oil Conservati	on Division	C 314 A.
M <del>UST BE NOTIFIE</del>	ED 24 Hours	Condition of Approval: notify
Spud DatPrior to the beginning		OCD Hobbs office 24 hours
	pr	ior of running MIT Test & Chart
I hereby certify that the information		ior of running MIT Test & Chart
I hereby certify that the information	pr	ior of running MIT Test & Chart
4	above is true and complete to the best of my know	ledge and belief.
I hereby certify that the information  SIGNATURE   STORY  SIGNATURE	above is true and complete to the best of my know	ior of running MIT Test & Chart
4	above is true and complete to the best of my know  TITLE Lift Specialist	ledge and belief.
SIGNATURE Steve (	above is true and complete to the best of my know  TITLE Lift Specialist	DATE 6/12/13  Doxy.com PHONE: _806-592-6312
SIGNATURE Steve Snow For State Use Only	above is true and complete to the best of my know  TITLE Lift Specialist  ead E-mail address: steve_snead@	DATE 6/12/13  Doxy.com PHONE: _806-592-6312
SIGNATURE Steve Snor State Use Only  APPROVED BY:	above is true and complete to the best of my know  TITLE Lift Specialist	DATE
SIGNATURE Steve Snow For State Use Only	above is true and complete to the best of my know  TITLE Lift Specialist  ead E-mail address: steve_snead@	DATE 6/12/13  Doxy.com PHONE: _806-592-6312
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SIGNATURE Steve Snor State Use Only  APPROVED BY:	above is true and complete to the best of my know  TITLE Lift Specialist  ead E-mail address: steve_snead@  TITLE DIST. MGP  Condition	DATE