State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE HOBBS OCD OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	Keviseu 3-27-2004
DISTRICTI	WELL API NO. 30-025-28304
DISTRICT II DISTRICT III DISTRICT II DIST	5. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210	STATE X FEE
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 RECEIVED	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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 proposals.)	South Hobbs (G/SA) Unit Section 6
1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned	8. Well No. COOP 1
Name of Operator Occidental Permian Ltd.	9. OGRID No. 157984
3. Address of Operator	10. Pool name or Wildcat Hobbs (G/SA)
HCR I Box 90 Denver City, TX 79323	
	From The East Line
Section 6 Township 19-S Range 38-E	NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3627' GL	
Pit or Below-grade Tank Application or Closure	
Pit Type Depth of Ground Water Distance from nearest fresh water well Distance from nearest surface water	
Pit Liner Thickness mil Below-Grade Tank: Volume bbls; Construction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PŁUG & ABANDONMENT	
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMEN	T JOB
OTHER: OTHER: Casing integr	rity 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
Date of test: 06/17/2013	
Pressure readings: Initial – 555 PSI; 15 min – 550 PSI; 30 min – 550 PSI	
Length of test: 30 minutes	
Witnessed: No This Approval of Temporary Packer set @4041' Abandonment Expires	
Packer set @4041' Top Perf @4135' Abandonment Expires	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify the	hat any pit or below-grade tank has been/will be
constructed or	
closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan	
SIGNATURE MINGLE TITLE Administrative Associate DATE 07/02/2013	
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy johnson@oxy.com	TELEPHONE NO. 806-592-6280
For State Use Only	
APPROVED BY TITLE 15. W	DATE 1-9-2013
CONDITIONS OF APPROVAL IF ANY:	\

