## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-200

FILE IN TRIPLICATE	HOBBS OCH CONSERV	VATION DIVISION		Revised 5-27-2004
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 Sout Santa Fo	h St. Francis Dr. e, NM 87505	WELL API NO. 30-025-07454	
<u>DISTRICT II</u>	MAR 1, 7 2014		5. Indicate Type of Lease	
1301 W. Grand Ave, Artesia, NM 88210	i		STATE	FEE X
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410	RECEIVED		6. State Oil & Gas Lease No.	
	NOTICES AND REPORTS ON W	ELLS	7. Lease Name or Unit Agreem	nent Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			North Hobbs (G/SA) Unit	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)			Section 29	
Type of Well:  Oil Well	Gas Well Other	Temporarily Abandoned	8. Well No. 411	
2. Name of Operator	Out Well   Oute	remporarry Abandoned	9. OGRID No. 157984	
Occidental Permian Ltd.			10.0	
<ol> <li>Address of Operator</li> <li>HCR I Box 90 Denver City,</li> </ol>	ΓX 79323		10. Pool name or Wildcat	Hobbs (G/SA)
4. Well Location				
Unit Letter A : 990	Feet From The Nortj	990 Fee	t From The East	Line
Section 29	Township 18-S	Range 38-I	E NMPM	Lea County
	11. Elevation (Show whether DF,	RKB, RT GR, etc.)		
	3647' GR			
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 Ma	terial	
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 OP	NS. PLUG & A	BANDONMENT
PULL OR ALTER CASING	Multiple Completion	CASING TEST AND CEMEN	IT JOB	
OTHER:		OTHER: Casing integri	ty test/TA status request	X
13. Describe Proposed or Completed	Operations (Clearly state all pertinent			tarting any
proposed work) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
Date of test: 03/05/2014			<b>a</b>	
Pressure readings: Initial – 560 PSI; 15 min – 560 PSI; 30 min – 560 PSI  This Approval of Temporem 5 13 Abandonment Expires  Abandonment Expires				
Length of test: 30 min		Abandon		for a section of the
Witnessed: NO				
CIBP @4195'				
Top perf @4102'				
I hereby certify that the information above	is true and complete to the best of my kno	wledge and belief. I further certify	that any pit or below-grade tank h	as been/will be
constructed or closed according to NMOCD guideling				
closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan				
SIGNATURE Mend	mondo sty	TITLE Administrative	Associate DATE	03/13/2014
TYPE OR PRINT NAME Mendy A	Johnson E-mail address:	mendy_johnson@oxy.com	TELEPHONE NO.	806-592-6280
For State Use Only	MR1012	//	$\Theta$ 0):	3/10/2011
APPROVED BY	John	TITLE COMPLIA	nce liften DAT	E <u> </u>
CONDITIONS OF APPROVAL IF ANY:		1	W	, ,

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