Submit 1 Copy To Appropriate District State of New Me	
Office <u>District 1</u> – (575) 393-6161 <b>HOBBS OCE</b> nergy, Minerals and Natu 1625 N. French Dr., Hobbs, NM 88240	ral Resources / Revised August 1, 2011 WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 882 MPR <b>2 9 201</b> CONSERVATION District III – (505) 334-6178	DIVISION 30-025-40859
	5. Indicate Type of Lease     STATE
1000 Rio Brazos Rd., Aztec, NM 87410         Santa Fe, NM 87           District IV - (505) 476-3460         Santa Fe, NM 87	
1220 S. St. Francis Dr., Santa Fe, NIXECEIVED 87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO PROPOSALS.)	JG BACK TO A North Hobbs (G/SA) Unit Section 19
1. Type of Well: Oil Well   Øas Well   Other	8. Well Number 945
2. 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 Letter H : 2361 feet from the North line and 1064 feet from the East line	
Section 19 Township 18S Range 38E NMPM Lea County	
11. Elevation (Show whether DR,	
3594.1' KB	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
	REMEDIAL WORK
TEMPORARILY ABANDON CHANGE PLANS	
PULL OR ALTER CASING  MULTIPLE COMPL  OWNHOLE COMMINGLE	
_	
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) POOH with injection equipment	
<ol> <li>POOH with injection equipment</li> <li>Clean out to 4990'</li> </ol>	
3) Perf per prog	During this procedure we plan to use
<ol> <li>Acid treat per prog</li> <li>RIH with injection assembly per Robbie Underhill</li> </ol>	the closed-loop system with a steel
6) Return well to injection	tank and haul contents to the required disposal per ODC Rule 19.15.17
Condition of Approval: notify	
	OCD Hobbs office 24 hours
Spud Date: Rig Release Da	te: prior of running MIT Test & Chart
I hereby certify that the information above is true and complete to the be	est of my knowledge and belief.
$\Omega$	
SIGNATURE TITLE_Injection Well Analyst DATE 4-23-14	
Type or print name_Robbie Underhill E-mail address: <u>Robert_Underhill@oxy.com</u> PHONE: <u>806-592-6287</u>	
APPROVED BY: Malur Bravn TITLEDist-Supervisor DATE 4/29/2014	
Conditions of Approval (if any)	
	APR 30 2011

APR 30 2014