

**HOBBSOCD**State of New Mexico  
Energy, Minerals and Natural Resources DepartmentForm C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**DEC 26 2014** **OIL CONSERVATION DIVISION****DISTRICT I**

1625 N. French Dr., Hobbs, NM 88240

**DISTRICT II**

1301 W. Grand Ave, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd, Aztec, NM 87410

1220 South St. Francis Dr.  
Santa Fe, NM 87505**RECEIVED**

WELL API NO.

30-025-26118

5. Indicate Type of Lease

STATE ☐FEE ☒

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name

South Hobbs (G/SA) Unit

8. Well No. 123

9. OGRID No. 157984

10. Pool name or Wildcat Hobbs (G/SA)

**SUNDRY NOTICES AND REPORTS ON WELLS**(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.)

1. Type of Well:

Oil Well ☒Gas Well ☐

Other Temporarily Abandoned

2. Name of Operator

Occidental Permian Ltd.

3. Address of Operator

HCR 1 Box 90 Denver City, TX 79323

4. Well Location

Unit Letter H 2390 Feet From The North Line and 150 Feet From The East LineSection 6Township 19-SRange 38-E

NMPM

Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)

3624' 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 Material

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐Multiple Completion ☐

OTHER: TA status extension request

1 YEAR☒**SUBSEQUENT REPORT OF:**REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐PLUG & ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐OTHER: ☐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.

Run MI. test to gain extension on temporary abandoned status.

**FINAL T/A!****25 YEARS - NO PROD.  
REPORTED.**I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be  
constructed orclosed according to NMOCD guidelines ☐, a general permit ☐or an (attached) alternative OCD-approved  
plan ☐

SIGNATURE

Mendy A. Johnson

TITLE Administrative Associate

DATE 12/23/2014

TYPE OR PRINT NAME

Mendy A. Johnson

E-mail address:

mendy\_johnson@oxv.com

TELEPHONE NO.

806-592-6280

For State Use Only

APPROVED BY

Maley S. Brown

TITLE

Dist. Supervisor

DATE

12/29/2014CONDITION OF APPROVAL: Notify OCD DISTRICT OFFICE  
24 HOURS prior to running the TA Pressure Test.**DEC 29 2014**