State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-200

FILE IN TRIPLICATE	OIL CONSERVATION PLOTS OF D	Revised 5-27-2004
DISTRICT I	1220 South St. Francis Dr.	WELL API NO.
1625 N. French Dr. , Hobbs, NM 88240	Santa Fe, NM 87505AN 2 3 2015	
DISTRICT II	JAN 20 -	5. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210	www.moon	STATE X FEE
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410	RECEIVED	6. State Oil & Gas Lease No.
	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	North Hobbs (G/SA) Unit
,	APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	Section 23
1. Type of Well:		8. Well No. 211
Oil Well	Gas Well Other Temporarily Abandoned	
2. Name of Operator		9. OGRID No. 157984
Occidental Permian Ltd. 3. Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX	79323	10005 (G/SA)
4. Well Location		
Unit Letter C: 330	Feet From The North 2310 Fee	et From The West Line
	 . 	NMPM Lea County
Section 23 Township 18-S Range 37-E NMPM Lea County		
	11. Blevillon (Blow Whether B1, 101B, 111 GA, etc.)	
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		
PULL OR ALTER CASING	Multiple Completion CASING TEST AND CEMEN	NI JOB []
OTHER: TA status extension requ	est / YEAR X 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 temp	porary abandoned status.	
Condition of Approval: notify		
	OCD Hobbs office 24 hours	
Dried of the 24 Hours		
prior of running MIT Test & Chart		
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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 or		
closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan		
SIGNATURE Administrative Associate DATE 02/21/2015		
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280		
For State Use Only M 1 NR		
APPROVED BY MARGONIAN TITLE WIST. Supervisor Date 1/26/2015		
CONDITIONS OF APPROVAL IF ANY:		

AN 26 2015

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