

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

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

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

HOBBS OCD

MAR 10 2015

RECEIVED

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> 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 <u>C</u> : <u>1309</u> Feet From The <u>North</u> <u>2310</u> Feet From The <u>West</u> Line Section <u>19</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County <u>✓</u>
11. Elevation (Show whether DF, RKB, RTGR, etc.) 3651' GL	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	OTHER: <u>Casing integrity test/TA status request</u> <input checked="" type="checkbox"/>

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: 02/25/2015

This Approval of Temporary
Abandonment Expires 2/25/2016

Pressure readings: Initial – 580 PSI; 15 min – 580 PSI; 30 min – 575 PSI

Length of test: 30 minutes

Witnessed: NO

CIBP set @4100'
Top perf @ 4143'

E-PERMITTING
P&A NR _____
DHC COMP _____
CSNG _____
TA P.M. _____
INT to PA _____
P&A R _____
CHG Loc _____
RBDMS SAS

I hereby certify that the information above is true and complete to the best of my knowledge and belief. If constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 03/06/2015
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 Marky A. Brown TITLE Dist. Supervisor DATE 3/11/2015

CONDITIONS OF APPROVAL IF ANY:

259 MONTHS

MAR 12 2015

