

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

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

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

WELL API NO.

30-025-028266

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit  
Section 32

8. Well No. 342

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 Injector ☐

2. Name of Operator

Occidental Permian Ltd.

3. Address of Operator

HCR 1 Box 90 Denver City, TX 79323

4. Well Location

Unit Letter O

475

Feet From The

South

1437

Feet From The

East

Line

Section 32

Township 18-S

Range 38-E

NMPM

Lea

County

11. Elevation (Show whether DF, RKB, RT GR, etc.)  
3626' GL

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:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG & ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Casing Integrity Test

☒

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: 06/02/2015

Pressure readings: Initial - 570 PSI; Ending - 570 PSI

Length of test: 32 minutes

Witnessed: Yes - George Bower w/NMOCD

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

Mendy A. Johnson

TITLE Administrative Associate

DATE 06/11/2015

TYPE OR PRINT NAME

Mendy A. Johnson

E-mail address:

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TELEPHONE NO.

806-592-6280

For State Use Only

APPROVED BY

Bill Sonnenmacher

TITLE

Staff Manager

DATE

7/1/2015

CONDITIONS OF APPROVAL IF ANY:

JUL 23 2015

