Submit 1 Copy To Appropriate District Office	Energy Minoral and Network Decomposition		Form C-103 Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
District 11 – (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-025-42592 5. Indicate Type of Lease
<u>District III</u> - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	District III – (505) 334-6178 1220 South St. Francis Dr.		STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 8'	6. State Oil & Gas Lease No.	
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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.)			South Hobbs (G/SA) Unit
1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other:			8. Well Number: 251
2. Name of Operator SEP 0 9 2015 Occidental Permian Ltd.		9. OGRID Number: 157984	
3. Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)	
2611 State Hwy 214 Denver City, TX 79323 RECEIVED			
4. Well Location Unit Letter N : 320 feet from the South line and 1181 feet from the West line			
Section 5	Township 19S	Range 38E	NMPM Lea County
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<u> </u>	3628.7' (KB)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK D PLUG AND ABANDON REMEDIAL WORK			K 🗌 ALTERING CASING 🗌
			— — —
PULL OR ALTER CASING DIMULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE			
_		:	_
OTHER: Initial Completion Image: OTHER: Initial Completion 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
1. Drillout DV tool to Float Collar at 4495' 2. Log well During this procedure we plan to use			
2. Log well During this			loop system with a steel
3. Based on cased hole log results, select perforations and acid treat the closed-			aul contents to the required
4. RIH with ESP equipmenttank and h5. Turn well to productiondisposal period			er ODC Rule 19.15.17
0.			
7. 8.			
9.			
Spud Date:	Rig Release D	ate:	
		ant of must les outlo de	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE Steve Snead TITLE Lift Specialist DATE _9/4/2015			
Type or print name Steve Snead E-mail address steve snead@oxy.com PHONE:_ 806-592-6312 For State Use Only			
APPROVED BY:			
Conditions of Approval (if any):			
		SFR	° 1 4 20151 ₩
			49 ZU13' W