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. HOBBS Of	30-025-25020
DISTRICT II	NOV 0 3 2	15. Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210	1107 0 0 2	STATE A TEE
DISTRICT III	14	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410	RECEIVE	
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		North Hobbs (G/SA) Unit
The state of the s	PLICATION FOR PERMIT" (Form C-101) for such proposals.)	Section 14
Type of Well: Oil Well	Gas Well Other Temporarily Abandoned	8. Well No. 441
Name of Operator Occidental Permian Ltd.		9. OGRID No. 157984
Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX 7	9323	, , , , , , , , , , , , , , , , , , , ,
4. Well Location		
Unit Letter P : 660	Feet From The South 660 Feet	et From The East Line
Section 14	Township 18-S Range 37-1 11. Elevation (Show whether DF, RKB, RT GR, etc.)	E NMPM Lea County
	3678' GL	
Pit or Below-grade Tank Application	or Closure	
	Water Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness mil	Below-Grade Tank: Volume bbls; Construction Ma	iteriai
E-PERMITTING <swd< th=""><th>RBDMS REMEDIAL WORK TA</th><th>SEQUENT REPORT OF: ALTERING CASING PLUG & ABANDONMENT</th></swd<>	RBDMS REMEDIAL WORK TA	SEQUENT REPORT OF: ALTERING CASING PLUG & ABANDONMENT
	ations (Clearly state all pertinent details, and give pertinent dates or Multiple Completions: Attach wellbore diagram of proposed	
Date of test: 10/06/2015 This Approval of Temporary Abandonment Expires 10/4/2016		
Pressure readings: Initial -560 PSI	Ending – 560 PSI Abandonment Expires_/C	0/6/2016
Length of test: 30 minutes		
Witnessed: NO		
CIBP @3925' w/35' cement on top Top perf @4012'		
	e 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	e OCD-approved
plan		
SIGNATURE Mendy	TITLE Administrative	Associate DATE 10/28/2015
TYPE OR PRINT NAME Mendy A. Joh	nson E-mail address: mendy_johnson@oxy.com	TELEPHONE NO. 806-592-6280
For State Use Only	110	
APPROVED BY Waley	Stown TITLE DIST	SuperVisologATE 11/4/2015
CONDITIONS OF APPROVAL IF ANY:	• • • • • • • • • • • • • • • • • • • •	

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