

HOBBS OCD

State of New Mexico  
Energy, Minerals and Natural Resources DepartmentForm C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

NOV 16 2015

## OIL CONSERVATION DIVISION

DISTRICT I  
1625 N. French Dr., Hobbs, NM 882401220 South St. Francis Dr.  
Santa Fe, NM 87505DISTRICT II  
1301 W. Grand Ave, Artesia, NM 88210DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410WELL API NO.  
30-025-314215. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name  
South Hobbs (G/SA) Unit

8. Well No. 230

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 ☐ Injector2. Name of Operator  
Occidental Permian Ltd.3. Address of Operator  
HCR 1 Box 90 Denver City, TX 79323

4. Well Location

Unit Letter B : 1100 Feet From The North Line and 2220 Feet From The East Line  
Section 4 Township 19-S Range 38-E NMPM Lea County11. Elevation (Show whether DF, RKB, RT GR, etc.)  
3617' GLPit 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: 09/30/2015

Pressure Readings: Initial - 580 PSI Ending - 560 PSI

Length of test: 30 minutes

Witnessed: NO

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 ☐  
planSIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 11/05/2015TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

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APPROVED BY Bill Samamah TITLE Staff Manager DATE 11/18/2015

CONDITIONS OF APPROVAL IF ANY:

NOV 19 2015



