Submit 1 Copy To Appropriate District OfficeState of New MexicoDistrict I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103
		Revised July 18, 2013 WELL API NO.
		30-025-42471 5. Indicate Type of Lease
		STATE FEE
		6. State Oil & Gas Lease No.
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.)		 Lease Name or Unit Agreement Name North Hobbs (GSA) Unit
1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other		8. Well Number 957
2. Name of Operator Occidental Permian Ltd.		9. OGRID Number 157984
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 4294 Houston, TX 77210		Hobbs (GSA)
4. Well Location Unit Letter P : 839 feet from the South line and 885 feet from the East line		
Unit Letter P : 839 feet from th Section 18 Township		885 feet from the East line NMPM Lea County
	whether DR, RKB, RT, GR, etc.	
3656.3' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB I		
PULL OR ALTER CASING I MULTIPLE COMPL CASING/CEMENT JOB		
CLOSED-LOOP SYSTEM	_	
OTHER: OTHER: Completion II. OTHER: Completion		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
08/07/15 – perf'd 556 holes 4226' – 4532'		
08/07/15 – acid job with 5000 gals 15% NEFE		
08/08/15 - ran 2 7/8" tubing @ 4058		
08/08/15 – set ESP @ 4104		
Spud Date: 08/05/15 (RUPU) Rig	g Release Date: 08/08/15	(RDPU)
A. M. S. S. S. S. S.		
I hereby certify that the information above is true and comp	lete to the best of my knowled	ge and belief.
A. r. A Llad		
SIGNATURE UPRU TIDA TI	TLE Regulatory Coordinato	DATE 12/10/15
	mail address: _ April_Hood@ @	DXy.com PHONE: 713-366-5771
For State Use Only		
APPROVED BY: Plant TITLE Petroleum Engineer DATE 12/11/15		
Conditions of Approval (if any):		

DEC 1 1 2015

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