## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	ATION DIVISION		RCVISCO 3-27-2004	
DISTRICT I		St. Francis Dr.	WELL API NO.		
1625 N. French Dr., Hobbs, NM 88240	Santa Fe,	MOBBS OCD	30-025-20167 5. Indicate Type of Lease	/	
DISTRICT II 1301 W. Grand Ave, Artesia, NM 88210			STATE STATE	FEE X	
DISTRICT III		MAR 0 7 2016	6. State Oil & Gas Lease No.	- 122   X   V	
1000 Rio Brazos Rd, Aztec, NM 87410					
SUNDRY NOTICES AND REPORTS ON WELL RECEIVED			7. Lease Name or Unit Agreeme	ent 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	
1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned			8. Well No. 90		
2. Name of Operator			9. OGRID No. 157984	<b>√</b>	
Occidental Permian Ltd.  3. Address of Operator			10. Pool name or Wildcat	Hobbs (G/SA)	
HCR 1 Box 90 Denver City, TX		110003 (0/5/1)			
4. Well Location					
Unit Letter O : 890 Feet From The South 1650 Feet From The East Line					
Section 9 Township 19-S Range 38-E NMPM Lea County  11. Elevation (Show whether DF, RKB, RT GR, etc.)					
	3611' RDB	B, RI GR, etc.)			
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: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING					
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OPNS. PLUG & ABANDONMENT				
PULL OR ALTER CASING					
The State Distriction residence					
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.					
Run MI test to gain extension on temporary abandoned status.					
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Condition of Approval: notify					
	OCD Hobbs office 24 hours				
	prior of running MIT Test & Chart				
I hereby certify that the information above is t	true and complete to the best of my knowl	edge and belief. I further certify the	hat any pit or below-grade tank has	s been/will be	
constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved					
The same plan					
SIGNATURE DATE 03/04/2016  TITLE Administrative Associate DATE 03/04/2016					
TYPE OR PRINT NAME Mendy Al Johnson E-mail address: mendy johnson@oxy.com TELEPHONE NO. 806-592-6280					
APPROVED BY Make ABrown TITLE DIST Supervisor DATE 3/7/2016					
CONDITIONS OF APPROVAL IF ANY:	MANAGORA	TITLE SIGL OF	DATE	2/1/01/6	

MAR 08 2016

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NO PROD REPORTED - 263 MONTHS