Submit 1 Copy To Appropriate District	State of New Me	exico tral Resources	Form C-103 Revised August 1, 2011
Office District 1 – (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 87210 District IV – (505) 476-3460 District IV – (505) 476-3460 Distri			WELL API NO.
			30-025-07370
			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe NM 87505			STATE FEE 6. State Oil & Gas Lease No.
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State OII & Gas Lease No.
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
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Section 19
1. Type of Well: Oil Well 🔲 Gas Well 🛛 Other: Injector			8. Well Number: 411
2. Name of Operator Occidental Permian Ltd.			9. OGRID Number: 157984
3. Address of Operator			10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX 79323			
4. Well Location			
Unit Letter A : 1300 feet from the North line and 1300 feet from the East line			
Section 19 Township 18S Range 38E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3679' DF			
12. Check Appro	priate Box to Indicate N	lature of Notice,	Report or Other Data
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE			11 JOB 🗌
OTHER:		OTHER:	
 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. MIRU Pulling Unit 2. POOH with injection assembly. 2. During this procedure we plan to use			
2. I cont with injection assembly			
packer expected to be set at current packer location 3942' and lower packer at 4225'. Intent is to isolate between packers previously disposal per ODC. Rule 19.15.17			
packer at 4225'. Intent is to isolate between packers previously disposal per ODC Rule 19.15.17 gueezed perforations.			
4. Return well to injection.			
5.			
6. Condition of Approval: notify			
7. 8. OCD Hobbs office 24 hours			
prior of running MIT Test & Chart			
Spud Date:	Rig Release D	ate:	
I hereby certify that the information above	is true and complete to the b	est of my knowledg	ge and belief.
11.1			
SIGNATURE Mill Man TITLE Pr. J. En, DATE 3/16/16			
Type or print name Rick Reeves E-mail address rick reeves@oxy.com PHONE: 713-215-7653			
For State Use Only A			
APPROVED BY: V aley A Drown title Dest. Supervisor DATE 3/21/2016			
Conditions of Approval (if any):			
U Contraction of the second			