

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

DISTRICT II

1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

| | |
|---|---|
| WELL API NO. 30-025-29522 | ✓ |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> | ✓ |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit | ✓ |
| 8. Well No. 209 | ✓ |
| 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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Injector | |
| 2. Name of Operator Occidental Permian Ltd. ✓ | |
| 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 | |
| 4. Well Location Unit Letter <u>D</u> : <u>265</u> Feet From The <u>North</u> Line and <u>1090</u> Feet From The <u>West</u> Line Section <u>8</u> Township <u>19-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County | |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3609' GL | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> Multiple Completion <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| OTHER: _____ | OTHER: <u>Casing Integrity Test</u> <input checked="" type="checkbox"/> |

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: 04/05/2016

Pressure Readings: Initial -550 PSI Ending - 540 PSI

Length of test: 32 minutes

Witnessed: Yes - George Bowers w/NMOCD

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 plan ☐ GB

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 04/20/2016
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only

APPROVED BY Bil Semanah TITLE Staff Manager DATE 4-29-16

CONDITIONS OF APPROVAL IF ANY:

APR 29 2016

5 PRINTED IN U.S.A. 6 PM

NOON

11

10

9

8

7

6 AM

5

4

3

2

1

MIDNIGHT

11

10

9

8

7

5

4

3

2

1

DATE
4/6/16
BR 2221

Graphic Controls
8

Oxy
South 4355 + 205
30-025-29502

D-8-195-386

Cat's Date-12/15/15
10000

Start-550H
end-540H
30min

Grand Tower 200

Tom Hawkins

BR
4-29-16