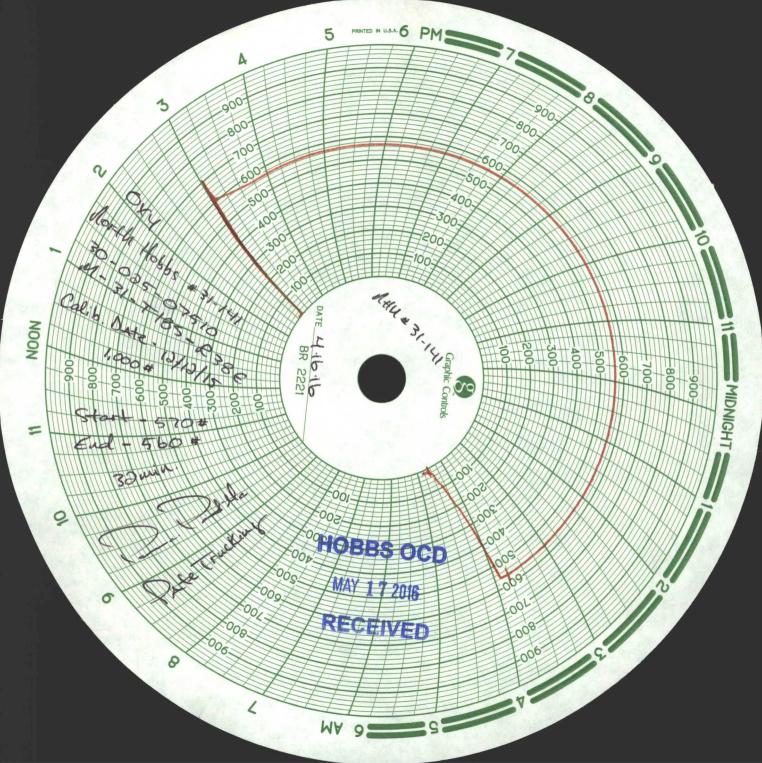
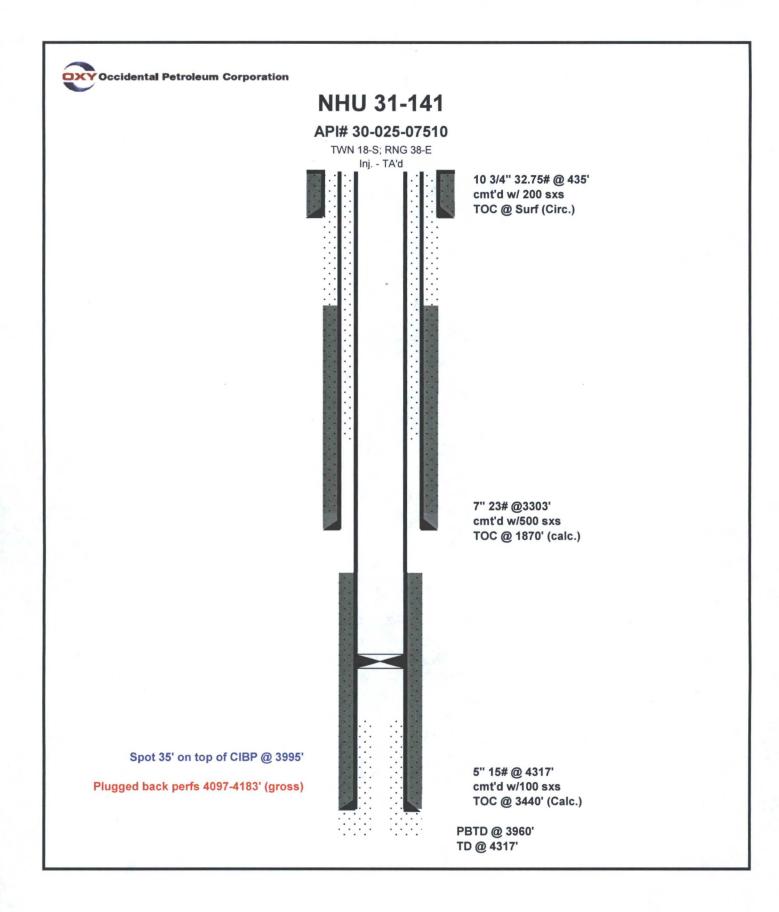
HOBBS OCD State of New Mexico						
MAY 17 2016 Energy, Minerals and Natural Resources Department	t Form C-103 Revised 5-27-2004					
FILE IN TRIPLICATE DISTRICT I RECEIVED OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	WELL API NO.					
1625 N. French Dr., Hobbs, NM 88240 Santa Fe, NM 87505 DISTRICT II	30-025-07510 * 5. Indicate Type of Lease					
1301 W. Grand Ave, Artesia, NM 88210	STATE FEE X					
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410	6. State Oil & 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	North Hobbs (G/SA) Unit Section 31					
Type of Well: Oil Well Gas Well Other Temporarily Abandoned	8. Well No. 141					
2. Name of Operator	9. OGRID No. 157984					
Occidental Permian Ltd. 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 M : 990 Feet From The South Line and 990 Feet	From The West Line					
11. Elevation (Show whether DF, RKB, RT GR, etc.)	NMPM Lea County					
3650' GR						
Pit or Below-grade Tank Application or Closure Pit Type Depth of Ground Water Distance from nearest fresh water well Pit Liner Thickness mil Below-Grade Tank: Volume bbls; Construction Material	reial					
CONVERSION RBDMS S RETURN TO REMEDIAL WORK RETURN TO TA Commence of the commence of	CEQUENT REPORT OF: ALTERING CASING NS. PLUG & ABANDONMENT T JOB ty test/TA status request XX including estimated date of starting any					
Date of test: 04/16/2016 This Approval of Temporary Abandonment Expires 4/16/2017						
Length of test: 32 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 to constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative						
SIGNATURE Mendy a phone TITLE Administrative.						
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com For State Use Only Maley Abrown TITLE Dist 5 APPROVED BY CONDITIONS OF APPROVAL IF ANY: TITLE Dist 5	upenie Date 5/20/2016					





American Valve & Meter, Inc.

1113 W. BROADWAY

MAY 1 7 2016

P.O. BOX 166 HOBBS, NM 88240 MAY 17 2016

RECEIVED

T0: Pate Trucking

DATE: 12/15/15

This is to certify that:

I, Tony Flores

Technician for American Valve & Meter Inc.

has checked the calibration of the following instrument.

8"_Pressure recorder

at these points.

Pressure #

Temperature *or Pressure #

Ser.# 12517

Test	Found	Left	Test	Found	Left-		
- 0	-	- 0		-	-		
- 500	-	- 500	-	-	-		
- 700	-	- 700	-	-	-		
- 1000	-	- 1000		-	-		
- 200	-	- 200	-	-	-		
- 0	-	- 0					

Remarks:

Signature: Jong Pr