

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

HOBBS OCD

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

RECEIVED
JUN 18 2016

| |
|---|
| WELL API NO. 30-025-27628 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit |
| 8. Well No. 182 |
| 9. OGRID No. 157984 |
| 10. Pool name or Wildcat Hobbs (G/SA) |

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|---|--|
| 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>F</u> : <u>1785</u> Feet From The <u>North</u> Line and <u>1810</u> Feet From The <u>West</u> Line Section <u>5</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.) 3621' 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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: _____ <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | PLUG & ABANDONMENT <input type="checkbox"/> |
| | 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: 05/23/2016

Pressure Readings: Initial - 540 PSI Ending - 540 PSI

Length of test: 30 minutes

Witnessed: YES - Kristel Heady 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 ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 06/08/2016
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 Mindy Brown TITLE Dist Supervisor DATE 6/13/2016
CONDITIONS OF APPROVAL IF ANY:

MIDNIGHT

1

2

3

4

5

6 AM

7

8

9

10

11

NOON

1

2

3

4

5

6 PM

7

8

9

10

11

RECEIVED

JUN 13 2018

HOBBS OCD

CC Goldenrod Ramon
Coburn, Hobbs 6/18
881 005-27638
4/15/18
4/15/18
4/15/18

Date Trucking
Serial 12517
Calb 12-15-K
100 PSI
Hobbs OCD

Graphic Controls

DATE 5-23-16
BR 2221

4/15/18
4/15/18
4/15/18

4/15/18
4/15/18
4/15/18