

Submit 1 Copy To Appropriate District Office
District I - (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 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

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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.) | | WELL API NO. 30-025-05450 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Injector <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator Occidental Permian Ltd. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 | | 7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit |
| 4. Well Location Unit Letter <u>O</u> : <u>660</u> feet from the <u>South</u> line and <u>160</u> feet from the <u>East</u> line Section <u>14</u> Township <u>18S</u> Range <u>37E</u> NMPM Lea County | | 8. Well Number <u>14-341</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3688' (DF) | | 9. OGRID Number: 157984 |
| | | 10. Pool name or Wildcat Hobbs (G/SA) |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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|---|---|--|--|
| 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 checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 1) MIRU PU
- 2) Isolate leak, test plug first then move to casing (lost 200 psi in seconds)
- 3) Repair leak
- 4) Ensure CIBP is set no higher than 3980' (top perf @4080') and cap with 35' of cement)
- 5) Run MIT to gain extension
- 6) Return well to TA status

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal per ODC Rule 19.15.17

Spud Date: Rig Release Date:
**Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart**

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Production Engineer DATE 6/14/2016

Type or print name Conor McGinnis E-mail address: conor.mcginis@oxy.com PHONE: 713-825-0902
For State Use Only

APPROVED BY: [Signature] TITLE Dist Supervisor DATE 7/18/2016
Conditions of Approval (if any):

MB