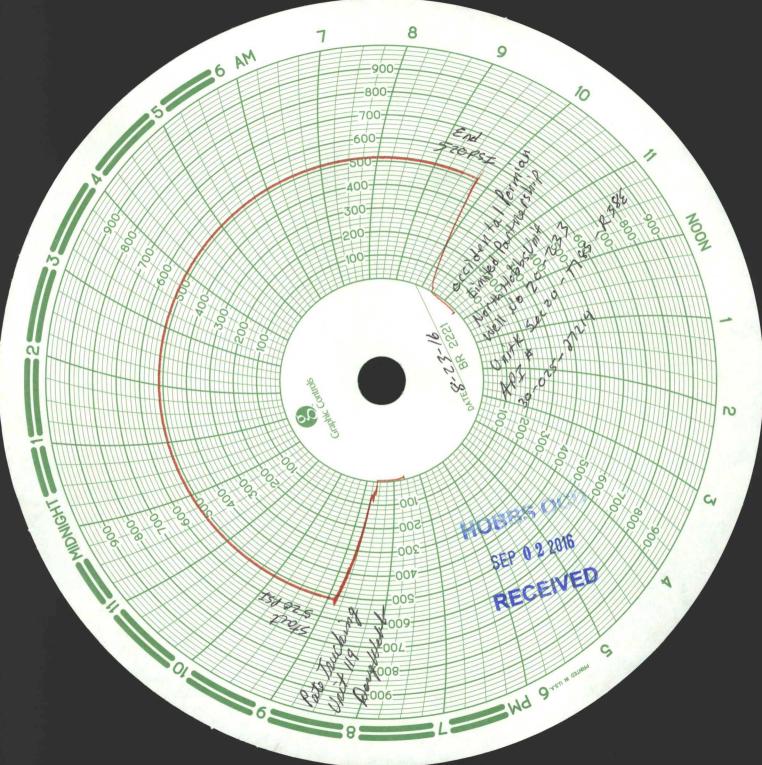
| Submit 1 Copy To Appropriate Distri Office | State of Iven | State of New Mexico rgy, Minerals and Natural Resources | | Form C-103 Revised July 18, 2013 | | |
|---|---|---|--------------------------|--|-----------|--|
| DISTRICT IV - (303) 4/0-3400 | OIL CONSERVAT OIL CONSERVAT SEP 0 2 2016220 South St. Santa Fe, N | ION DIVISION Francis Dr. | 5. Indicate Ty STATE | IO. 5-27214 ype of Lease | 0,2013 | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | RECEIVED | | | - | | |
| (DO NOT USE THIS FORM FOR PI | NOTICES AND REPORTS ON WE ROPOSALS TO DRILL OR TO DEEPEN O APPLICATION FOR PERMIT" (FORM C-1) | R PLUG BACK TO A | North Hob | bbs (G/SA) Unit | Jame | |
| 1. Type of Well: Oil Well | 8. Well Numb | 8. Well Number 233 9. OGRID Number 157984 | | | | |
| Name of Operator Occidental Permian, Ltd | | | 10. Pool name or Wildcat | | | |
| Address of Operator HCR 1 Box 90 Denve | er City TX 79323 | | Hobbs (| | | |
| 4. Well Location | 51 Oily, 17 70020 | | Tiobbs (| (0/04) | | |
| Unit Letter K | : 1610 feet from the | | | from the West | _line | |
| Section 20 | Township 18-S 11. Elevation (Show whether | Range 38-E | NMPM Le | ea County | | |
| | 3648' GR | , DI, Idib, III, OI, etc., | | | | |
| 12. Che | eck Appropriate Box to Indica | te Nature of Notice, | Report or Oth | her Data | | |
| of starting any propose proposed completion of Date of test: 08/23/ | RBDMS MO TA TM TA TM RO CHG LOC A NR P&A R Completed operations. (Clearly state and work). SEE RULE 19.15.7.14 Nor recompletion. W2016 Start - 520 PSI Ending - 520 Pointnutes | REMEDIAL WOR COMMENCE DR CASING/CEMEN OTHER: Csg into a little all pertinent details, and MAC. For Multiple Co | EK [ILLING OPNS. T JOB | status request dates, including estima ach wellbore diagram of | ated date | |
| | This Approval | 5 / 5 | 2/2018 | | | |
| | Abandonment | Expires 6/6 | 4 2010 | , | (40) | |
| | | LAS | r 2 ye | EAR EXTEN | Stor | |
| | | | | | | |
| Spud Date: | Rig Releas | se Date: | | | | |
| | | | | | | |
| I hereby certify that the information | ation above is true and complete to | the best of my knowledg | ge and belief. | | | |
| SIGNATURE | 2 Johnnorthe A | admin. Associate | . 4 | DATE 08/30/2016 | 3 | |
| Type or print name Mendy / For State Use Only | A. Johnson E-mail ad | ldress: mendy_johnso | on@oxy.com | PHONE: 806-592-6 | 5280 | |
| APPROVED BY: Conditions of Approval (if any) | Stown TITLE A | Sist Sup | ewisae | DATE 9/8/2 | 016 | |



American Valve & Meter, Inc.

1113 W. BROADWAY

P.O. BOX 166 HOBBS, NM 88240

| T0: Pate | Trucking | | | DATE: 06/15 | /16 | | |
|----------------------|----------------------|--|----------------------------|-------------|------|--|--|
| This is to | certify that: | | | | | | |
| I, Tony Flores | | Technician for American Valve & Meter Inc. | | | | | |
| has check | ed the calibration o | f the following in | strument. | | | | |
| 8"_Pressure recorder | | | Ser#12517 | | | | |
| at these pe | oints. | | | | | | |
| | Pressure # | | Temperature *or Pressure # | | | | |
| Test | Found | Left | Test | Found | Left | | |
| - 0 | - | - 0 | - | - | _ | | |
| - 500 | _ | - 500 | _ | - | 1 | | |
| - 700 | - | - 700 | _ | - | - | | |
| - 1000 | - | - 1000 | - | - | _ | | |
| - 200 | - | - 200 | - | - | _ | | |
| - 0 | - | - 0 | | | | | |
| Remar | ks: | | | | | | |
| | | | | | | | |

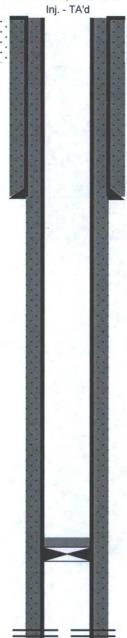
Signature: Joy So-



NHU 20-233

API# 30-025-27214

TWN 18-S; RNG 38-E



8-5/8" 24# @ 1500' cmt'd w/850 sxs TOC @ Surface (Circ.)

Spot 35' on top of CIBP @ 4175'

Plugged Back Perfs: 4258-92'

5-1/2" 14# @ 4510' cmt'd w/1050 sxs TOC @ surface (circ.)

PBTD @ 4150' TD @ 4510'