

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) 334-6138
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 July 18, 2013

WELL API NO. 30-025-42541
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 19552
7. Lease Name or Unit Agreement Name South Hobbs Unit (G/SA)
8. Well Number 250
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3600' GR

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Occidental Permian Ltd	
3. Address of Operator P.O. Box 4294, Houston, TX 77210	
4. Well Location Unit Letter A : 336 feet from the North line and 930 feet from the East line Section 10 Township 19S Range 38E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3600' GR	

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Add Perfs <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.

- MIRU x NDWH x NUBOP
- POOH 127 jts tbq x ESP
- RIH 6 1/8" bit to TD @ 4470 x circ well
- RUWL x perf'd 4244 - 4360 w 284 holes
- Scale squeeze w/ 55 gals PAW3900 x 30 bbls FW x 1375 gals RE3215SCW x lfush w/ 163 bbls FW x 3550 gal 15% acid.
- Assembled ESP x RIH ESP @ 4177 x 130 jts tbq @ 4152
- RD x NDBOP x NUWH

Spud Date:

11/30/16

Rig Release Date:

12/07/16

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

SIGNATURE

April Hood

TITLE Regulatory Specialist

DATE 01/03/2017

Type or print name April Hood

E-mail address: April_Hood@Oxy.com

PHONE: 713-366-5771

For State Use Only

APPROVED BY:

Mahy Brown

TITLE

AO/II

DATE

1/4/2017

Conditions of Approval (if any):