Submit 1 Copy To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised August 1, 2011 District I - (575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 30-025-07445 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease District III - (505) 334-6178 1220 South St. Francis Dr. STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 6. State Oil & Gas Lease No. 87505 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 North Hobbs (G/SA) Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH Section 29 PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well Other 341 2. Name of Operator 9. OGRID Number: 157984 Occidental Permian Ltd. 3. Address of Operator 10. Pool name or Wildcat 1017 West Stanolind Road Hobbs, New Mexico 88240 Hobbs (G/SA) 4. Well Location Unit Letter 330 feet from the South feet from the East O line and 2318 line Section 29 Township 18S Range 38E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3643' GL 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON REMEDIAL WORK ALTERING CASING □ CHANGE PLANS COMMENCE DRILLING OPNS. P AND A TEMPORARILY ABANDON PULL OR ALTER CASING MULTIPLE COMPL -CASING/CEMENT JOB DOWNHOLE COMMINGLE OTHER: OTHER: 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. During this procedure we plan to use the closed-1. RUPU and POOH W/ESP equipment loop system with a steel tank and haul contents to 2. CO and Treat if necessary the required disposal per ODC Rule 19.15.17 3. RIH W/ESP eqmt 4. RDPU and clean location 5 Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE WA/LS DATE 5/19/17 **SIGNATURE** E-mail address terry\_a\_duncan@oxy.com\_PHONE: \_ 575 397-8223 Type or print name Terry Duncan For State Use Only APPROVED BY: Conditions of Approval (if any)