| Submit 1 Copy To Appropriate District State of New Mexico  | Form C-103   |
|--|--|
| Office District I – (575) 393-6161 Energy, Minerals and Natural Reson  | urces Revised August 1, 2011                               |
| 1625 N. French Dr., Hobbs, NM 88240  | WELL API NO.   |
| District II - (575) 748-1283 811 S. First St., Artesia, NM 88210  HOBOS CONSERVATION DIVISI  | ON 30-025-07511  |
| <u>District III</u> – (505) 334-6178 1220 South St. Francis Dr.  | 5. Indicate Type of Lease  STATE FEE                       |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV – (505) 476-3460  JAN 2 6 2 Santa Fe, NM 87505   | STATE L. TEE Z.  |
|  | 6. State Oil & Gas Lease No.                               |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  | North Tiooos (G/S/1) Chit                                  |
| PROPOSALS.)  | Section 31   |
| 1. Type of Well: Oil Well Gas Well Other   | 8. Well Number   |
| 0.37   | 111  |
| 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   | 110000 (0,511)   |
| Unit Letter D : 440 feet from the North line and   | 990 feet from the West line                                |
|  | ,  |
| Section 31 Township 18S Range 38 11. Elevation (Show whether DR, RKB, RT   |  |
| 3651' DF   | , GR, etc.)  |
| And the state of t |  |
| 12. Check Appropriate Box to Indicate Nature of N  | Notice Report or Other Data                                |
| 12. Check Appropriate Box to indicate Nature of I  | Notice, Report of Other Data                               |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |  |
| PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐   |  |
| TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMME   | ENCE DRILLING OPNS. P AND A                                |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING   | G/CEMENT JOB   |
| DOWNHOLE COMMINGLE   |  |
| _  | _  |
| OTHER: OTHER   |  |
| 13. Describe proposed or completed operations. (Clearly state all pertinent de   | etails, and give pertinent dates, including estimated date |
| of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Mul  | tiple Completions: Attach wellbore diagram of              |
| proposed completion or recompletion.   |  |
| -  |  |
| RUPU and POOH W/ESP equipment  | During this procedure we plan to use the closed-           |
| 2. CO and Treat if necessary   | loop system with a steel tank and haul contents to         |
| 3. RIH W/ESP eqmt  | the required disposal per ODC Rule 19.15.17                |
| 4. RDPU and clean location   |  |
| 5.   |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Court Potes  |  |
| Spud Date: Rig Release Date:   |  |
|  |  |
| I havely contifue that the information above is two and complete to the best of my k   | noveledge and heliaf                                       |
| I hereby certify that the information above is true and complete to the best of my k   | niowieuge and benef.                                       |
| 1  |  |
| SIGNATURE Per to turion TITLE WA/LS  | DATE 1/23/2018   |
| SIGNATURE Terry A. Junian TITLE WA/LS  |  |
| Type or print name Terry Duncan E-mail address terry_a_du  |  |
| For State Use Only   |  |
|  | 11   |
| APPROVED BY: NOW TITLE NO  | /11 DATE 1/29/2018   |
| Conditions of Approval (if any):   | 6  |
|  |  |