

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

Form C-103

Revised July 18, 2013

HOBBS OCD

MAR 07 2018

RECEIVED

OIL CONSERVATION DIVISION

220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-05440

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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 ☒ Gas Well ☐ Other ☐ Temporarily Abandoned

2. Name of Operator
Occidental Permian, Ltd

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location

Unit Letter E : 1980 feet from the North line and 660 feet from the West line
Section 13 Township 18-S Range 37-E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3692' DF

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit

8. Well Number 121

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: TA status extension request ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
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.

Run MI test to gain extension on temporary abandoned status.

Condition of Approval: notify

OCD Hobbs office 24 hours

prior of running MIT Test & Chart

Spud Date:

Rig Release Date:

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

SIGNATURE Mendy A Johnson TITLE Admin. Associate DATE 02/22/2018

Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280

For State Use Only

APPROVED BY: Mary Brown TITLE AO/II DATE 3/7/2018

Conditions of Approval (if any):

NO PROD REPORTED - 284 MONTHS

MB