Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161 HORBS CI	rgy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
	L CONSERVATION DIVISION	30-025-26833
District III – (575) 748-1283 811 S. First St., Artesia, NM 88214 2 9 2018 District III – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE X FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa EVED 87505	Salatio, 1411 07505	6. State Off & 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		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FO PROPOSALS.)		North Hobbs G/SA Unit
1. Type of Well: Oil Well Gas Well	Other Injector	8. Well Number 222
2. Name of Operator Occidental Permian LTD		9. OGRID Number 157984
Address of Operator		10. Pool name or Wildcat
PO Box 4294 Houston, TX 77210		Hobbs; Grayburg - San Andres
4. Well Location		
Unit Letter F : 1470	feet from theN line and	1395 feet from the W line
Section 30	Township 18S Range 38E	NMPM County Lea
11. Elev	vation (Show whether DR, RKB, RT, GR, etc.)	
3611' RDB		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION	ON TO: SUB	SEQUENT REPORT OF:
	AND ABANDON REMEDIAL WORL	
_	E PLANS COMMENCE DRI	
PULL OR ALTER CASING MULTIF	PLE COMPL CASING/CEMENT	I JOB
CLOSED-LOOP SYSTEM		
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.		
MIRU x NDWH x NUBOP.		
POOH tbg x pkr.		
RIH 3 1/4" bit x tagged @ 4270'.		
Perf'd 4200' – 4254'.		
Pumped 2500 gals 15% NEFE acid.		
RIH on/off tool x pkr 4106' @ x 132 jts tbg @ 3937'.		
Ran MIT chart – Chart attached.		
RD x NDBOP X NUWH.		
Spud Date: 01/17/2018	Rig Release Date: 01/24/201	18
	A	11.11.0
I hereby certify that the information above is t	the and complete to the best of my knowledge	e and belief.
Dock Vlack		
SIGNATURE MICHAEL SIGNATURE	TITLE Regulatory Specialist	DATE03/21/2018
Type or print name April Hood For State Use Only	E-mail address: April_Hood@Ox	y.com PHONE: 713-366-5771
N 1 4K, 10/17 1/2010		
APPROVED BY: 7 LALEN DATE 4/3/2018		
Conditions of Approval (if any):		
RBDMS-CI	HART - V	/

