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	ResourcesWELL API NO. 30-025-34375VISIONDr.STATE	FEE	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR S PROPOSALS.) 1. Type of Well: Oil Well S Gas Well Other:	ACK TO A North Hobbs (G/SA)		
2. Name of Operator	9. OGRID Number:	9. OGRID Number: 157984	
Occidental Permian Ltd. 3. Address of Operator	10 Pool name or W	10. Pool name or Wildcat	
HCR 1 Box 90 Denver City, TX 79323	Hobbs (G/SA)	Indeat	
4. Well Location			
Unit Letter I : <u>1650</u> feet from the <u>South</u> line and <u>630</u> feet from the <u>East</u> Line			
Section 32 Township 18-S Range 38-E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3636' (GL)			
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 OTHER: 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. 1. POOH with production equipment. 2. Clean out to 4320' (PBTD) 3. Acid wash existing perf with 300 gal of 15% HCL 4. Perf following intervals: 4250' - 4258', 4265' - 4270', 4278' - 4285', 4292' - 4302', 4310' - 4316'. 5. Acid treat new perfs with ~ 1800 gal of 15% HCL 6. RIH with production equipment 7. Return well to production			
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			
Type or print name <u>Carlos Restrepo</u> E-mail address <u>carlos restrepo@oxy.com</u> PHONE: <u>713-366-5147</u>			
For State Use Onty Maley A Journ Pitte A0/11 DATE 4/18/2018 APPROVED BY:			