

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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-07355
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
8. Well Number 221
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; Grayburg - San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3642' KB

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Occidental Permian LTD	
3. Address of Operator PO Box 4294 Houston, TX 77210	
4. Well Location Unit Letter F : 2310 feet from the N line and 2310 feet from the W line Section 19 Township 18S Range 38E NMPM County Lea	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 114 jts x ESP. Found pumps locked. RIH 4 1/4" bit x tagged PBTD @ 4275'.  
RIH 7" RBP @ 3750' x pressure tested well, held ok. Ran USIT log from 3750' to surface x POOH RBP.  
Shot new perms from 4130' - 4116'. RIH 5"PKR @ 4165' x RBP @ 4180'. Ran injectivity rate w/ 25 bbls @ 900psi.  
Re-set RBP @ 4160' x PKR @ 4120' x pumped 600 gals 15% PAD acid x flushed w/ 50 bbls BW.  
POOH PKR x RBP x RIH ESP @ 114 jts tbg @ 3779'. NDBOP x NUWH.

Spud Date:

03/05/2018

Rig Release Date:

03/09/2018

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

SIGNATURE

*April Hood*

TITLE

Regulatory Specialist

DATE

04/24/2018

Type or print name

April Hood

E-mail address:

April\_Hood@Oxy.com

PHONE:

713-366-5771

For State Use Only

APPROVED BY:

*Mary Brown*

TITLE

*AO/II*

DATE

*5/24/2018*

Conditions of Approval (if any):