

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

☒ AMENDED REPORT

HOESS OCD
JUN 15 2018
RECEIVED

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

Occidental Permian LTD PO Box 4294 Houston, TX 77210		¹ Operator Name and Address	² OGRID Number 157984
			³ API Number 30-025-23221
⁴ Property Code 19520	⁵ Property Name North Hobbs G/SA Unit		⁶ Well No. 551

⁷ Surface Location

UL - Lot G	Section 30	Township 18S	Range 38E	Lot Idn	Feet from 2234	N/S Line N	Feet From 2312	E/W Line E	County Lea
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⁸ Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
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⁹ Pool Information

Pool Name Hobbs; Grayburg - San Andres	Pool Code 31920
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Additional Well Information

¹¹ Work Type Plug Back	¹² Well Type P	¹³ Cable/Rotary	¹⁴ Lease Type State	¹⁵ Ground Level Elevation 3653
¹⁶ Multiple N	¹⁷ Proposed Depth 5000	¹⁸ Formation San Andres	¹⁹ Contractor	²⁰ Spud Date 07/01/2018
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☒ We will be using a closed-loop system in lieu of lined pits

²¹ Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17.50	13.375	48	378	400	0
Inter	12.25	9.625	36	3851	1748	0
Prod	8.75	7	26	6999	650	2700 TS

Casing/Cement Program: Additional Comments

Well will be plugged back into the North Hobbs G/SA Unit
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²² Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Annular	5000	3000	

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> , if applicable. Signature: <i>April Hood</i> Printed name: April Hood Title: Regulatory Specialist E-mail Address: April_Hood@Oxy.com Date: 06/12/2018 Phone: 713-366-5771		OIL CONSERVATION DIVISION Approved By: <i>[Signature]</i> Title: Petroleum Engineer Approved Date: <i>06/15/18</i> Expiration Date: <i>06/15/20</i> Conditions of Approval Attached	
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