Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		Į W	ELL API NO.
<u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DI	VISIQN	30-025-05455
District III - (505) 334-6178 1220 South OBSID			Indicate Type of Lease
Santa Fe NM 87505		5	STATE FEE State Oil & Gas Lease No.
District 1V - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 JUN 2 5 2018		5 2018	State On & Gas Dease No.
(DO NOT USE THIS FORM FOR BRODO	CES AND REPORTS ON WELLS	EMED 7	Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIE	SALS TO DRILL OR TO DEEPEN PLOTE STATES OF STA	UCH	North Hobbs (G/SA) Unit
PROPOSALS.)			Well Number 331
1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned		bandoned	331
Name of Operator Occidental Permian, Ltd		9.	OGRID Number 157984 .
3. Address of Operator		10	D. Pool name or Wildcat
HCR 1 Box 90 Denver City, TX 79323			Hobbs (G/SA)
4. Well Location			
Unit Letter J: 1650 feet from the South line and 1650 feet from the East line			
Section 14 Township 18-S Range 37-E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3684' GL			
10. Cl. 1 A 'A D. A I I' A NIA W CNIAW Decrease Off Date			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK			☐ ALTERING CASING ☐
TEMPORARILY ABANDON			NG OPNS.□ P AND A □
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM	5 ' 03	~	—
OTHER: TA status extension request 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.			
~ 100			
SIGNATURE CLASSICIATE DATE 06/22/2018			
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280			
For State Use Only			
APPROVED BY: WALL APPROVED BY: WALL DATE 6/23/2018			
Conditions of Approval (it any):			