1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210 <u>District III</u> - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	State of New Mexico sy, Minerals and Natural Resources CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-103 Revised August 1, 2011 WELL API NO. 30-025-44822 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
SUNDRY NOTICES AND F (DO NOT USE THIS FORM FOR PROPOSALS TO DRII DIFFERENT RESERVOIR. USE "APPLICATION FOR I PROPOSALS.) 1. Type of Well: Oil Well Gas Well 2. Name of Operator Occidental Permian Ltd. 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 4. Well Location	LL OR TO DEEPEN OR PLUG BACK TO A PERMIT" (FORM C-101) FOR SUCH HOBBS OCD OCT 1 5 2018 RECE:VED	7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit 8. Well Number: 21-664 9. OGRID Number: 157984 10. Pool name or Wildcat Hobbs (G/SA)
	om theNorth line and1795 Township 18S Range 37E	_feet from theEastline NMPM Lea County
	tion (Show whether DR, RKB, RT, GR, etc.	
NOTICE OF INTENTION PERFORM REMEDIAL WORK PLUG AN TEMPORARILY ABANDON CHANGE	ID ABANDON 🔲 REMEDIAL WOR	SEQUENT REPORT OF: IK
OTHER: Initial Completion	OTHER:	
 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 PU. Drillout DV tool and cleanout to Float Collar and record PBTD, Run logs Selectively perforate San Andres ROZ and TZ targets between 4100' TVD and Base of Unit @ 4500' TVD. Acid treat new perforations. RIH with production equipment RDMO PU. Turn well to production. Turn 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 Mile Mc TITLE Pad. En. DATE 10/7/18		
Type or print nameRick Reeves E-mail address rick reeves@oxy.com PHONE: 713-215-7653 For State Use Only APPROVED BY: DATE 10/15/2018 Conditions of Approval (if any):		