

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

Energy, Minerals and Natural Resources

Revised August 1, 2011

HOBBS OCD

NOV 05 2018

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

WELL API NO.

30-025-28308

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Hobbs (G/SA) Unit

8. Well Number: COOP 5

9. OGRID Number: 157984

10. Pool name or Wildcat Hobbs (G/SA)

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 ☐ Gas Well ☒ Other: Injector ☒2. Name of Operator
Occidental Permian Ltd.3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location

Unit Letter L: 1980 feet from the South line and 646 feet from the West lineSection 34 Township 18S Range 38E NMPM Lea County11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3650' (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:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

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. MIRU PU. POOH with Injection Equipment
2. Isolate zone within San Andres interval that is taking majority of injection with plug and packer.
3. Method of isolation will be determined by length of pipe taking injection in undesired interval.
4. RIH injection equipment and set packer at +/-4080'
5. Circulate inhibited packer fluid
6. Perform MIT
7. RDPU

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal per ODC Rule 19.15.17

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.

SIGNATURE [Signature] TITLE Production Engineer DATE 11/05/2018Type or print name Jake Perry E-mail address: Jake.Perry@oxy.com PHONE: 713-215-7546**For State Use Only**APPROVED BY: [Signature] TITLE AD/I DATE 11/5/2018

Conditions of Approval (if any):

MB

| | | | |
|--------------------------------------|--|----------------------------|--|
| | City of Hobbs Municipal Code Section 8.44.050 (Existing Well Permit) Application | | |
| Date: | 11/5/2018 | | |
| Operator: | Oxy Permian Ltd. | | |
| Lease Name: | South Hobbs Unit | | |
| Well Name: | COOP 5 | | |
| Well Location: | NE corner of W Taylor St and N Leech St. 32.702117, -103.142131 | | |
| | | | |
| Estimated Rig Up Date: | 01/15-20/2019 | | |
| | | | |
| Surface equipment add/change: | N/A | | |
| | | | |
| Description of Procedure: | 1. MIRU PU. POOH with Injection Equipment 2. Isolate zone within San Andres interval that is taking majority of injection with plug and packer. 3. Method of isolation will be determined by length of pipe taking injection in undesired interval. 4. RIH injection equipment and set packer at +/-4080' 5. Circulate inhibited packer fluid 6. Perform MIT 7. RDPU | | |
| | | | |
| Attachment(s): | | | |
| NMOCD Form | | | |
| Traffic Control Plan | | | |
| | | | |
| Local Oxy Contact: | Josh Schut | 701-690-7053 (day time) | |
| | Alfredo Cenicerros | 806-215-2385 (day time) | |
| | Glen Hubbard | 575-631-6881 (day time) | |
| | Oxy Control Room | 575-391-4727 (after hours) | |