Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
	Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	Son and a second s	WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CC	NSERVATION DIVISION	30-025-07338 -
<u>District III</u> – (505) 334-6178 122	20 South St. Arancis Dr. 2010	5. Indicate Type of Lease STATE ☐ FEE ☑
	Santa Fe, NM 8005	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	CIVE.	
87505 SUNDRY NOTICES AND REP	OPTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name of Onit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		North Hobbs (G/SA Unit
1. Type of Well: Oil Well 1 Gas Well Other Temporarily Abandoned		8. Well Number 241
2. Name of Operator		9. OGRID Number
Cccidental Permian, Ltd		157984
3. Address of Operator		10. Pool name or Wildcat
2611 State Hwy 214 Denver City, TX 79323		Hobbs (G/SA)
4. Well Location		
	from the South / line and 23	10feet from the Westline
Section - 18 Township 18-S Range 38-E _NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3670' DF		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION T	O SUB	SEQUENT REPORT OF:
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
OTHER: TA status extension request	(Clearly state all pertinent details and	d give pertinent dates including estimated date
 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 TA	A status.	
	Condition	
Condition of Approval: notify		
OCD Hobbs office 24 hours		
Drior of many ince 24 hours		
prior of running MIT Test & Chart		
		- Chart
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and	d complete to the best of my knowledg	e and belief.
$\mathcal{T}_{\mathcal{T}}$		x x
SIGNATURE CARLY U APAMIT	TITLE Administrative Associa	te DATE 01/10/2019
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280		
For State Use Only		, /
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APPROVED BY: Conditions of Approval (if any):		DATE //14/ BO/9
Conditions of Approval (If any).	v U	

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