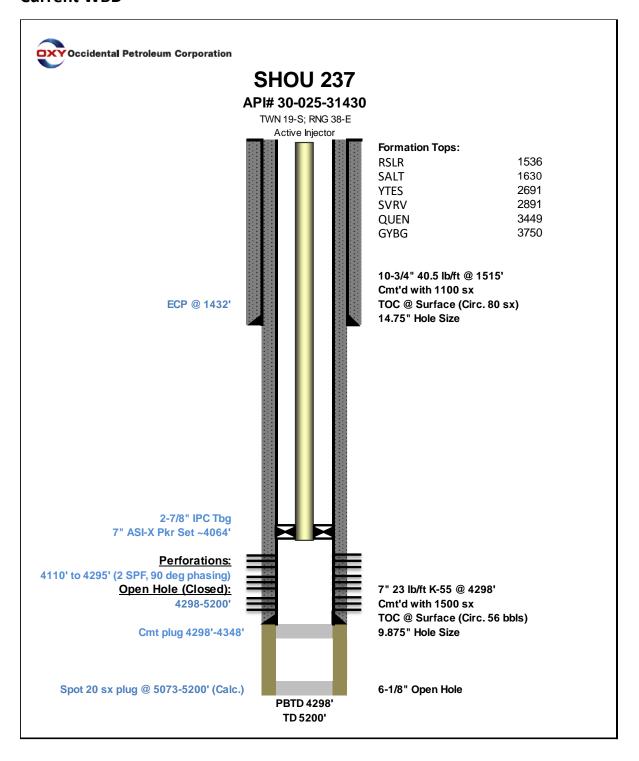
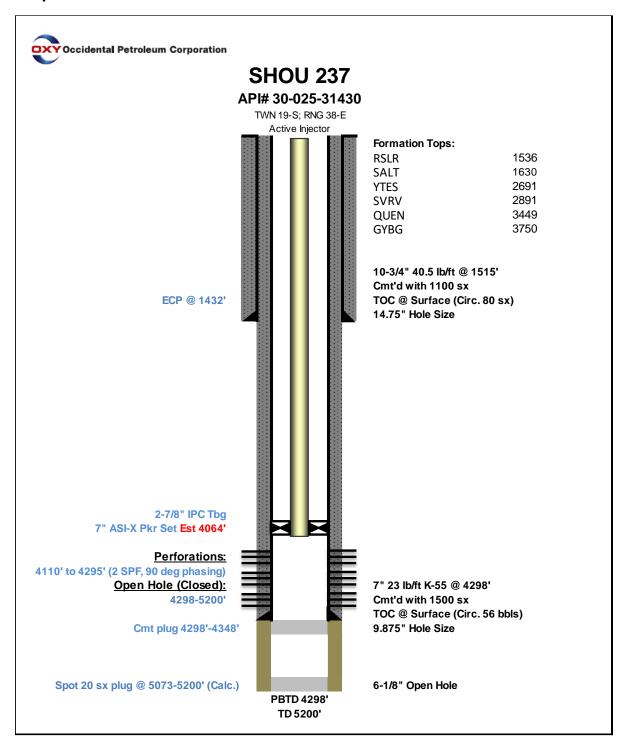
Office Applophate bistilet 1 PM	State of New Mexico	Form C-103 1 of 5
<u>District I</u> – (575) 393-6161 Energ 1625 N. French Dr., Hobbs, NM 88240	y, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL	CONSERVATION DIVISION	30-025-31430
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease  STATE FEE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	,	19552
87505 SUNDRY NOTICES AND F	REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRII DIFFERENT RESERVOIR. USE "APPLICATION FOR I	South Hobbs G/SA Unit	
PROPOSALS.)	8. Well Number 237	
1. Type of Well: Oil Well Gas Well 2. Name of Operator	Other Injector	9. OGRID Number
Occidental Permian LTD.		157984
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 4294, Houston, TX 77210		Hobbs; Grayburg - San Andres
4. Well Location	0011711	1010
	eet from the SOUTH line and	1910 feet from the EAST line
	Township 19S Range 38E	NMPM County LEA
11. Elevat 3610' (GL)	ion (Show whether DR, RKB, RT, GR, etc.	<i>;.)</i>
3010 (GE)		
12 Check Appropriate	e Box to Indicate Nature of Notice	Report or Other Data
12. Спеск Арргориал	e Box to maleate Nature of Notice	, Report of Other Data
NOTICE OF INTENTION	N TO: SUE	BSEQUENT REPORT OF:
	D ABANDON 🔲 REMEDIAL WOI	<del>-</del>
TEMPORARILY ABANDON	<del></del>	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE	E COMPL CASING/CEMEN	NT JOB
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM CSg Pressu	re Fail/Repair 🔽 OTHER:	
		nd give pertinent dates, including estimated date
	ULE 19.15.7.14 NMAC. For Multiple Co	
proposed completion or recompletion.	•	
Objective: Repair cause of injector casing	pressure. Return well to injection.	
Please see detailed planned procedure and	WBDs attached	
ricado dos astanea plarintea proceduro ano	. Tree anached.	
C105 Completion Report for CTI submitted	1/4/25 - Action ID #: 417005	
	<u></u>	
Sd Data.	pi-p-l D	
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true	and complete to the best of my line and	go and baliaf
i hereby certify that the information above is true	and complete to the best of my knowled	ge and ucher.
D ma		2/2/25=
SIGNATURE Roni Mathew	TITLE Regulatory Advisor	DATE 2/3/2025
Type or print name Roni Mathew	E-mail address: roni_mathew@	PHONE: 713.215.7827
For State Use Only	E-mail address: Tolii_Mathew@	PHUNE: 113.213.1021
FOI State USE OHLY		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		

## **Current WBD**



# **Proposed WBD**



## Objective:

Repair cause of injector casing pressure. Return well to injection.

## Job Plan:

- MIRU PU.
- Kill well, ND WH NU BOP.
- Perform testing for source of casing pressure.
- POOH with Injection Equipment.
- Run Injection Equipment. Perform MIT.
- RDMO PU.

Sante Fe Main Office Phone: (505) 476-3441

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

CONDITIONS

Action 427711

#### **CONDITIONS**

Operator:	OGRID:
OCCIDENTAL PERMIAN LTD	157984
P.O. Box 4294	Action Number:
Houston, TX 772104294	427711
	Action Type:
	[C-103] NOI Workover (C-103G)

#### CONDITIONS

(	Created By		Condition Date
	mgebremichael	The packer shall not be set more than 100 ft above the top part of the injection interval.	2/13/2025