

Submit 1 Copy To Appropriate District
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-015-40347
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OCCIDENTAL PERMIAN LIMITED PARTNERSHIP		6. State Oil & Gas Lease No.
3. Address of Operator: PO BOX 4294 HOUSTON, TX 77210		7. Lease Name or Unit Agreement Name DEVON 8 FEE
4. Well Location Unit Letter: I 1771 feet from the _SOUTH_ line and _467_ feet from the _EAST_ line Section 8 Township 25S Range 28E NMPM EDDY County		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 157984
		10. Pool name or Wildcat HAYHOLLOW BONE SPRING, W.

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 ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

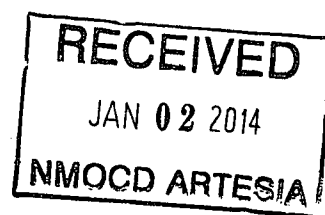
SUBSEQUENT REPORT OF:

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

OTHER: FIRST GAS SALE DATE ☒

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.

DEVON 8 FEE - FIRST GAS SALE DATE OF 12/10/2013



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 Jessica A. Shelton TITLE: Regulatory Technician DATE 12/30/2013

Type or print name Jessica A. Shelton E-mail address: jessica_shelton@oxy.com PHONE: 713-840-3011

For State Use Only

APPROVED BY: [Signature] TITLE: Dir. of DEPWSR DATE 1/2/14

Conditions of Approval (if any):