

Submit a 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

WELL API NO. 30-025-29064
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 19520
7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
8. Well Number 113
9. OGRID Number 157984
10. Pool name or Wildcat HOBBS; GRAYBURG-SAN ANDRES
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3658' GL

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 **Injection**

2. Name of Operator
Occidental Permian LTD

3. Address of Operator
P.O. Box 4294 Houston, TX 77210-4294

4. Well Location
Unit Letter **D** : **1310** feet from the **NORTH** line and **195** feet from the **WEST** line
Section **30** Township **18S** Range **38E** NMPM County **LEA**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>	CMT SQZ <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>	

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.

See planned procedure attached.

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 Roni Mathew TITLE Regulatory Advisor DATE 12/07/2023

Type or print name Roni Mathew E-mail address: roni_mathew@oxy.com PHONE: (713) 215-7827

For State Use Only

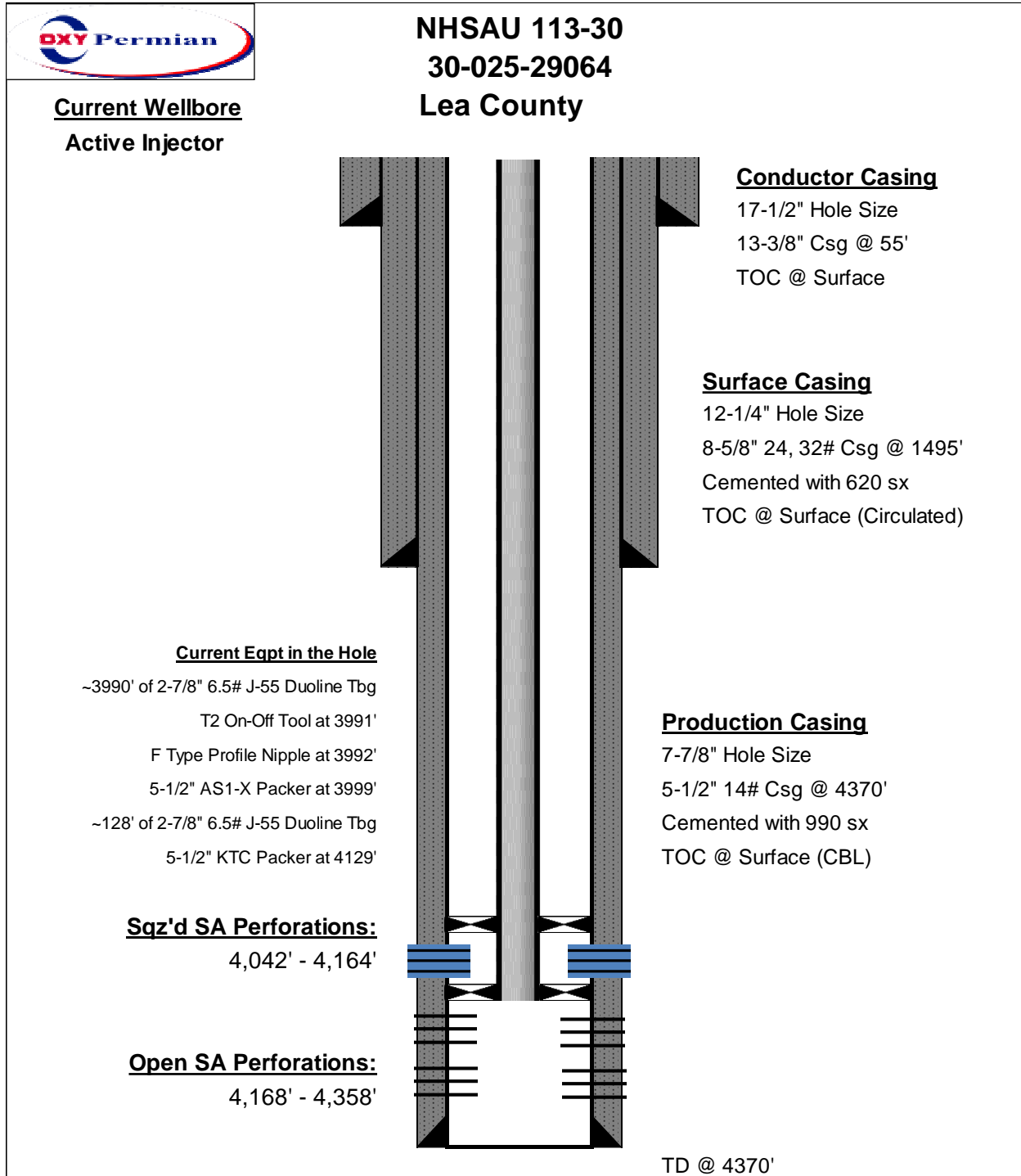
APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

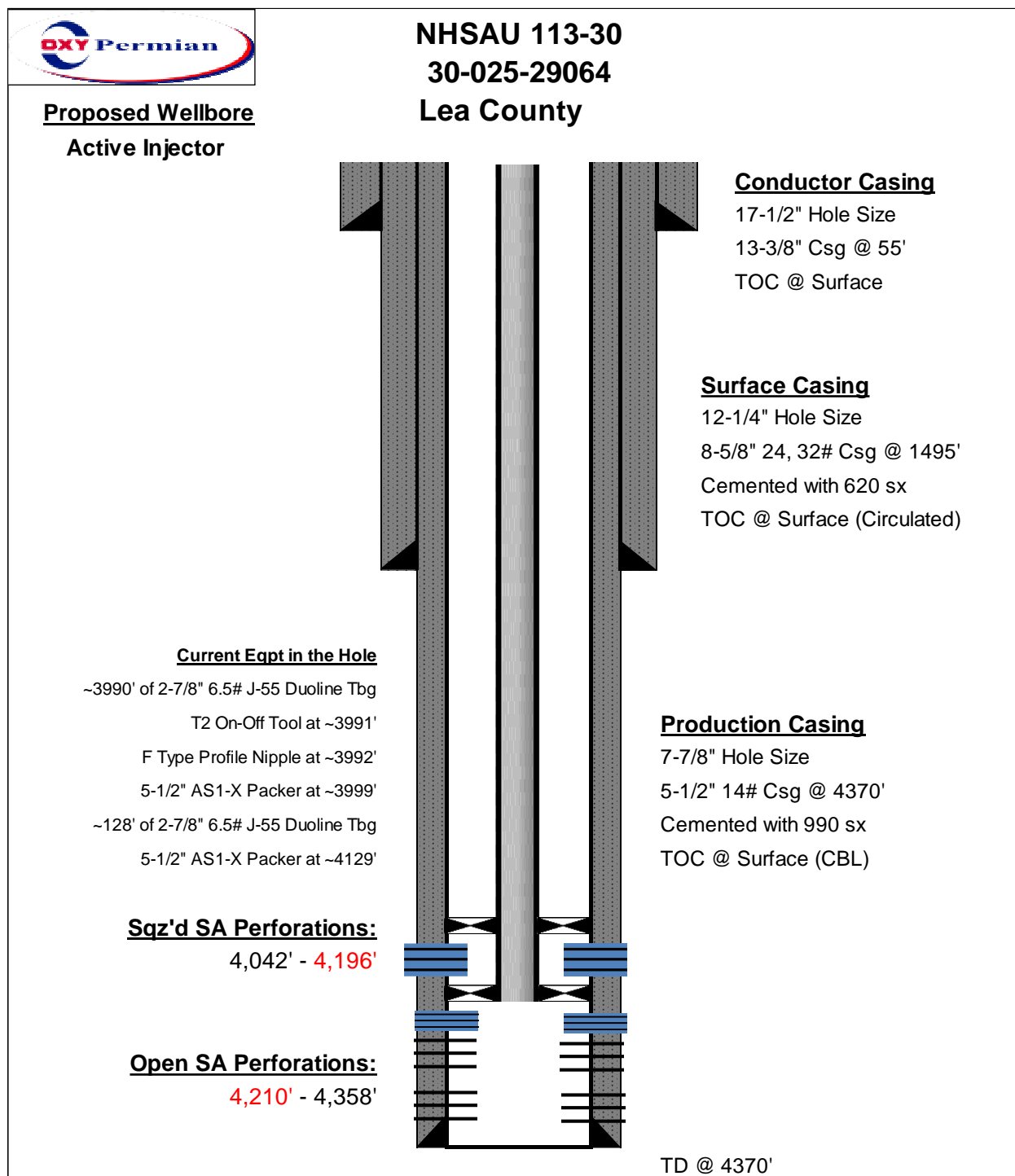
Procedure:

- 1) MIRU PU
- 2) Kill well x ND WH x NU BOP
- 3) POOH w/ straddle packer assembly
- 4) PU 4-3/4" bit on 2-7/8" WS & CO to PBTD @ 4365'
- 5) POOH w/ bit
- 6) RU WL
- 7) Set CIBP @ 4203' x RD WL
- 8) RIH w/ CICR & set at ~3999'
- 9) Cement squeeze Zn 1 -> Zn 2L
- 10) PU 4-3/4" bit & RIH x DO Cmt & CIBP to 4365' x POOH
- 11) RU WL
- 12) Perforate 5-1/2" csg from 4220'-4304' x RD WL
- 13) PU PPI tool & acid stimulate perforations w/ ~6,000 gal 15% HCL x POOH
- 14) Run injection & straddle packer assembly x Set btm pkr at 4129' & top pkr at 3999'
- 15) RD PU
- 16) Return well to injection

Current WBD



Proposed WBD



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Santa Fe, NM 87505

CONDITIONS

Action 292066

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 292066
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
mgebremichael	The well shall pass MIT after workover is finalized to resume injection.	1/22/2024