State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-200

FILE IN TRIPLICATE HOBBS OCOLL CONSERVATION DIVISION	Revised 5-27-2004
DISTRICT I 1220 South St. Francis Dr.	WELL API NO
1625 N. French Dr., Hobbs, NM 88240 MAR 1.7 2014 Santa Fe, NM 87505 DISTRICT II	30-025-28354 5 . Indicate Type of Lease
1301 W. Grand Ave, Artesia, NM 88210	STATE FEE X
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 874 0	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS 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	South Hobbs (G/SA) Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.) 1. Type of Well:	8. Well No. 151
Oil Well Gas Well Other Temporarily Abandoned	.5.
2. Name of Operator . Occidental Permian Ltd.	9. OGRID No. 157984
3. Address of Operator	10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City, TX 79323 4. Well Location	
Unit Letter B 710 Feet From The North 2410 Feet From The East Line	
Section 10 Township 19-S Range 38-E	
11. Elevation (Show whether DF, RKB, RT GR, etc.)	
3617' KB	
Pit or Below-grade Tank Application or Closure	
Pit Type Depth of Ground Water Distance from nearest fresh water well	,
Pit Liner Thickness mil Below-Grade Tank: Volume bbls; Construction Material	
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPN	NS. PLUG & ABANDONMENT
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMEN	T JOB
OTHER: OTHER: Casing integrit	ty test/TA status request X
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
This Approv	al of Temporary 3/7/2015
Date of test: 03/07/2014 This Approv Abandonme	ent Expires
Pressure readings: Initial – 560 PSI; 15 min – 560 PSI; 30 min – 560 PSI	
Length of test: 30 minutes	
Witnessed: NO	
CIBP @4250' Top perf @4301'	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be	
constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved	
70 plan	
SIGNATURE MINORY CLAUTONOUN TITLE Administrative Associate DATE 03/13/2014	
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy johnson@oxy.com TELEPHONE NO. 806-592-6280	
For State Use Only	
APPROVED BY MULLISTOWN TITLE COMPLEX	mce Hewdate 2/18/2014
CONDITIONS OF APPROVAL (F AN)	ω ' ' , , ,
	MAR \$9 2014 ON

