Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I (575) 202 6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 BB District II – (575) 748-1283	OIL CONSERVATION DIVISION	30-025-07338
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	10000 10 7 10	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87416 2	Santa Fe, NM 87505	STATE FEE S
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oil & Gas Lease No.
87505 RECE	EAND REPORTS ON WELLS	7 1 N
Control Contro	S AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICAT	ION FOR PERMIT" (FORM C-101) FOR SUCH	North Hobbs (G/SA) Unit
PROPOSALS.) 1. Type of Well: Oil Well Ga	s Well Other Temporarily Abandoned	8. Well Number 241
2. Name of Operator		9. OGRID Number 157984
Occidental Permian, Ltd	/ '	
3. Address of Operator		10. Pool name or Wildcat
HCR 1 Box 90 Denver City,	TX 79323	Hobbs (G/SA)
4. Well Location		
Unit Letter N : 330 feet from the South line and 2310 feet from the West line		
Section 18	Township 18-S Range 38-E 1. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
	3670' DF	
Executive Annual Conference of the Conference of		The state of the s
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
	MULTIPLE COMPL CASING/CEMEN	_
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	CX OTUED.	
OTHER: TA status extension requ	est OTHER:	d give pertinent dates including estimated 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.		
Run MI test to gain extension on temporary abandoned status.		
	C	andition of A
Condition of Approval: notify		
OCD Hobbs office 24 hours		
prior of running MIT Test & Chart		
	prior	or running will lest & Chart
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
Thereby certify that the information above is true and complete to the best of my knowledge and benefit.		
Maria A Charles and		
SIGNATURE Admin. Associate DATE 02/16/2017		
Type or print name Mendy A. Johns	E-mail address: mendy_johnso	on@oxy.com PHONE: 806-592-6280
Type or print name Mendy A. Johns For State Use Quly	E-mail address:Offise	PHUNE: 000-332-0200
APPROVED BY:	Shown TITLE HOLL	DATE A A A A
Conditions of Approval (if any):	,	

NO PRODUCTION REPORTED IN 2914-MONTHS