Submit 1 Copy To Appropriate District Office	State of New Me	exico	Form C-103
D: (500) 202 (16)	Energy, Minerals and Natu	ıral Resources	Revised July 18, 2013
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 8820 Bistrict II – (575) 748-1283	S OCA JOEDANATION	DIVIGION	WELL API NO. 30-025-07430
811 S. First St., Artesia, NM 88210 OTL CONSERVATION DIVISION		5. Indicate Type of Lease	
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 2 0 2017 District IV – (505) 476-3460 1220 South St. Francis Dr. Santa Fe, NM 87505		STATE FEE	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, SAFEC 87505	IVED	7303	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		North Hobbs (G/SA) Unit	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned		8. Well Number 224	
2. Name of Operator		9. OGRID Number 157984	
Occidental Permian, Ltd			
3. Address of Operator HCB 1 Poy 00 Denver City TV 70333		10. Pool name or Wildcat	
HCR 1 Box 90 Denver City, TX 79323 4. Well Location		Hobbs (G/SA)	
	2310 feet from the North	line and 16	650 feet from the West line
Section 29 Township 18-S Range 38-E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3653' DF			
12. Check Ap	propriate Box to Indicate N	ature of Notice,	Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			
TEMPORARILY ABANDON			
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMENT	1 30B
CLOSED-LOOP SYSTEM			
OTHER: TA status extension requ		OTHER:	
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 recon		e. Tor whattiple con	inpletions. Attach welloofe diagram of
Run MI test to gain extension	on on temporary abandoned s		
Condition of Approval: notify			
OCD Hobbs office 24 hours			CD Hobbs office 24 hours
prior of running MIT Test & Chart			
C. I.D.	Dia Dalassa Da		
Spud Date:	Rig Release Da	ite:	
I hereby certify that the information ab	ove is true and complete to the be	est of my knowledge	e and belief.
7- 0	^ ^		
SIGNATURE DATE 02/16/2017			
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280			
For State Use Only			
APPROVED BY WOULD DATE 2/21/2017			
APPROVED BY:) TITLE	O/II	DATE 2/21/2017
APPROVED BY:	Hown TITLE A	O/II	DATE 2/21/2017
	NOWN TITLE A	O/II	
	NO PRODUCTIO	O/II	