Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION DIVISION		30-025-28974
District III – (505) 334-6178	Santa Fe, NM 87505		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NA 7410 District IV – (505) 476-3460	Santa Fe, NM 8	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505 SFP 1			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO LIFELD OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE TO LICATION FOR PERMIT" (FORM C-101) FOR SUCH			South Hobbs (G/SA) Unit
PROPOSALS.) 1. Type of Well: Oil Well Ga	s Well Other Temporari	8. Well Number 176	
Name of Operator Occidental Permian, Ltd			9. OGRID Number 157984
3. Address of Operator			10. Pool name or Wildcat
HCR 1 Box 90 Denver City, TX 79323			Hobbs (G/SA)
4. Well Location	200 and Morth	2	I Foot
	200 feet from the North	line and 21	
Section 6	Township 19-S R 1. Elevation (Show whether DR		NMPM Lea County
2001年1月20日 2011年1月2日 1月1日 1日 1	3622' GL		
12. Check App	propriate Box to Indicate N	lature of Notice,	Report or Other Data
NOTICE OF INTE		The state of the s	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORI TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI			
	IULTIPLE COMPL	CASING/CEMENT	
DOWNHOLE COMMINGLE	_		_
CLOSED-LOOP SYSTEM OTHER: TA status extension request	IZI.	OTHER:	П
13. Describe proposed or complete	d 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.			
Condition of Approval: notify			
OCD Hobbs office 24 hours			
1 July 1			4 A 11 A 11
prior of running MIT Test & Chart			
Spud Date: Rig Release Date:			
I hereby certify that the information abo	ve is true and complete to the b	est of my knowledge	and belief.
SIGNATURE MENOLY Show TITLE Admin. Associate DATE 09/07/2017			
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280			
For State Use Only Mal 18 10 17			
APPROVED BY: VICINIA DATE 9/11/201			
Conditions of Approval (if any):			
101010			
No Trad Reported - in 23 MONTHS			
The man of the second			