

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

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.)		WELL API NO. 30-025-35999
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Occidental Permian LTD		6. State Oil & Gas Lease No. 19520
3. Address of Operator P.O. Box 4294 Houston, TX 77210-4294		7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
4. Well Location Unit Letter I : 1528 feet from the South line and 854 feet from the East line Section 29 Township 18S Range 38E NMPM County LEA		8. Well Number 944
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3644' GL		9. OGRID Number 157984
		10. Pool name or Wildcat HOBBS; GRAYBURG-SAN ANDRES

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 checked="" type="checkbox"/> CTI		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.

- 1.MIRU PU
- 3.RIH 6-1/8" bit, DO CIBP @ 4935' and at 4950, continue CO to PBTD @ +/- 5963' POOH with bit
- 4.RIH with treating packer and set @ +/- 4950'
- 5.Acidize open hole with 20,000 gals of 15% HCL and 16,000 # of rock salt. POOH with treating equipment.
- 6.RIH 6-1/8" bit, and CO to PBTD. POOH and LD bit
- 7.RIH w/ injection packer and set @ 4930' POOH and LD WS
- 8.RU WL, run inspection log with CBL/caliper from 4930' to surface
- 9.RIH with injection tubing, latch into packer.
- 10.Run H-5 Chart
- 11.RD PU

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

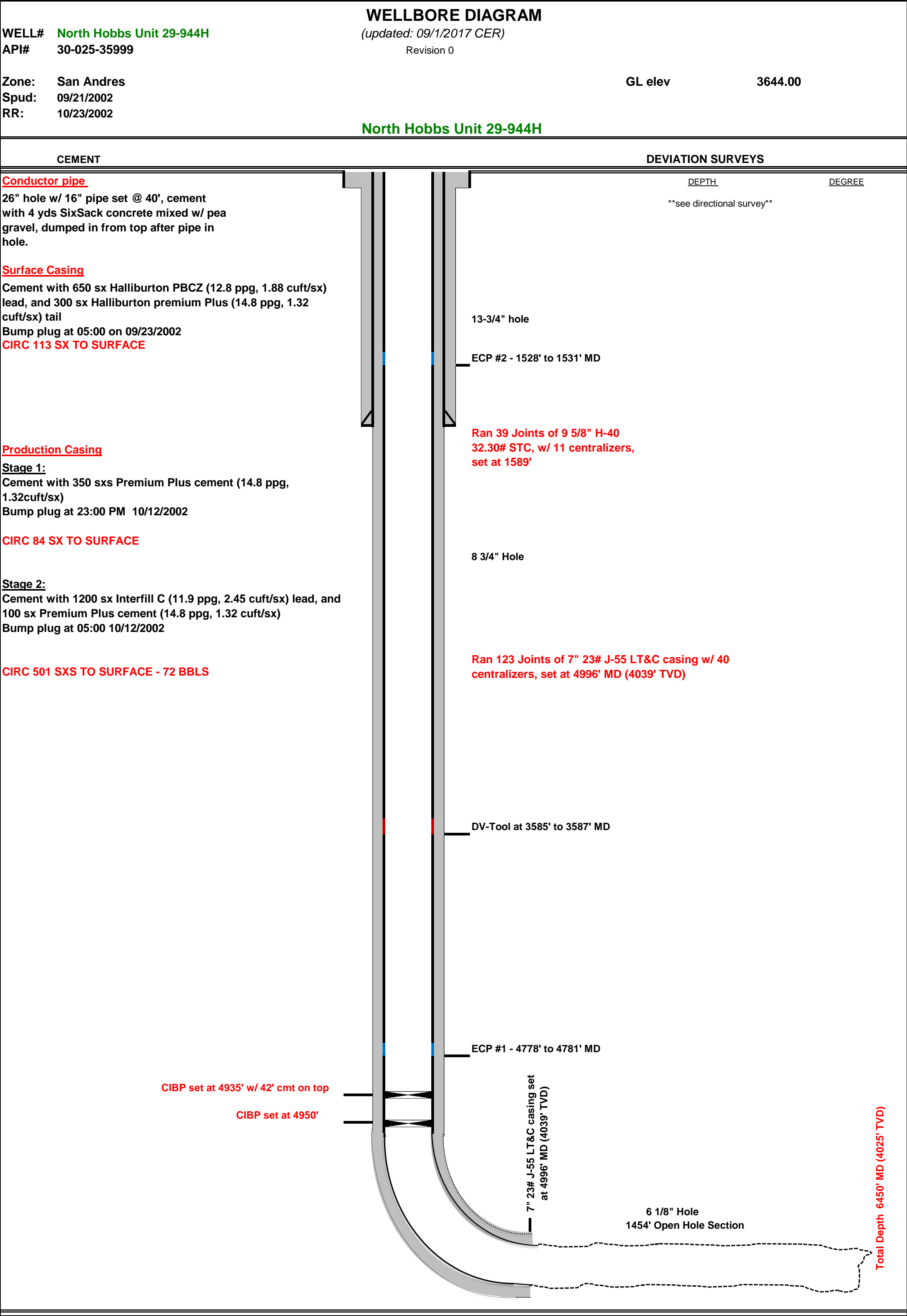
SIGNATURE Roni Mathew TITLE Regulatory Analyst Sr. DATE 10/29/2021

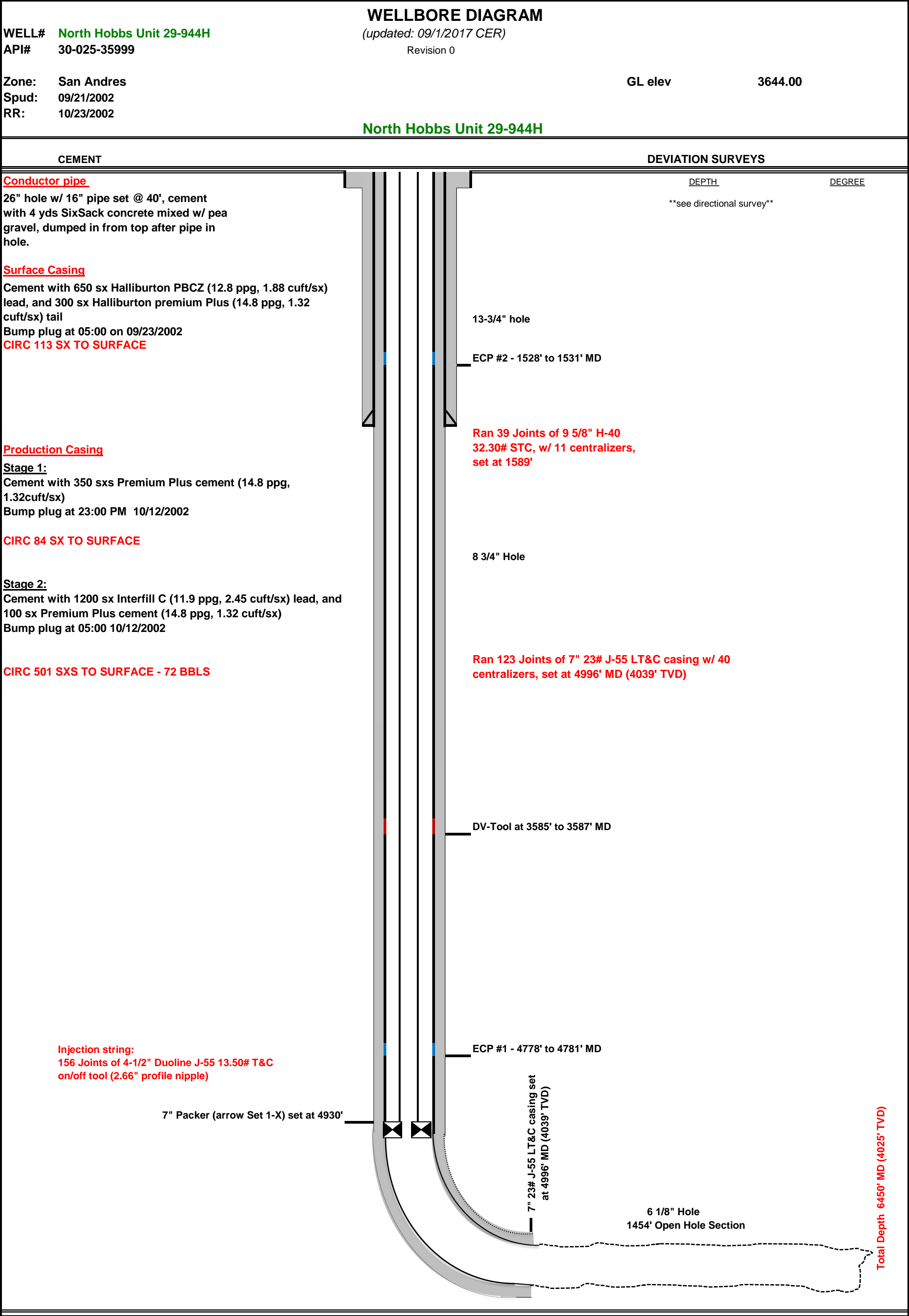
Type or print name Roni Mathew E-mail address: roni_mathew@oxy.com PHONE: (713) 215-7827

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):





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CONDITIONS

Action 58745

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 58745
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
pkautz	None	11/12/2021