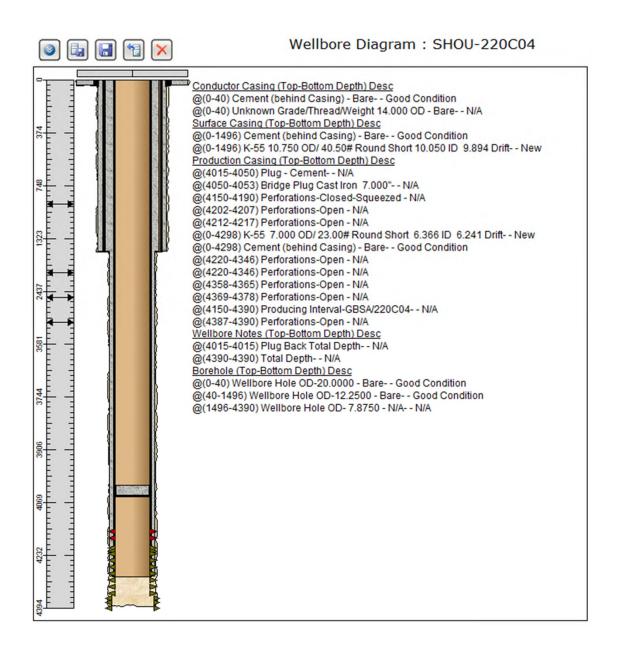
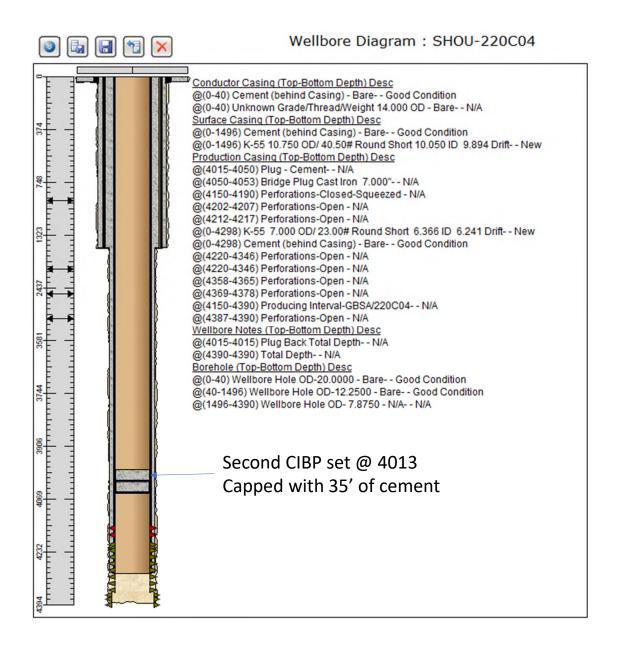
Received by Och; Appropriate Disi48:48 PM	State of New Mexico	Form C-103 <sup>1</sup> of 4
1625 N. French Dr., Hobbs, NM 88240	ergy, Minerals and Natural Resources	Revised July 18, 2013  WELL API NO. 30-025-29891
011 5. 1 list 5t., Altesia, 1411 00210	IL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		19552
SUNDRY NOTICES AN	D REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION F		South Hobbs G/SA Unit
PROPOSALS.)		8. Well Number 220
1. Type of Well: Oil Well Gas We  2. Name of Operator	ll U Other	9. OGRID Number
OCCIDENTAL PERMIAN LTD		157984
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 4294, Houston, TX 77210		Hobbs; Grayburg - San Andres
4. Well Location	a a North a 446	NO West W
Unit Letter C: 1425	feet from the North line and 148	
Section 4	Township 19S Range 38E evation (Show whether DR, RKB, RT, GR, etc.,	NMPM County LEA
3635' G	, , , , , , , , , , , , , , , , , , , ,	
12. Check Appropri	riate Box to Indicate Nature of Notice,	Report or Other Data
		•
NOTICE OF INTENTI	ON TO: SUB AND ABANDON ☐ REMEDIAL WOR	SEQUENT REPORT OF: K ☐ ALTERING CASING ☐
	GE PLANS COMMENCE DRI	<del>_</del>
<del></del>	IPLE COMPL	_
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	OTHER.	
OTHER:  13. Describe proposed or completed one	OTHER:	d give pertinent dates, including estimated date
	E RULE 19.15.7.14 NMAC. For Multiple Con	
proposed completion or recompletion	n.	
Planned Procedure:		
MIRU PU, check pressure, Kill well, ND WH and	NULBOP	
• RIH with test packer, set packer @ 4013' and test		
<ul> <li>Isolate source of pressure.</li> <li>If bottom plug is leaking, plan to set CIBP</li> </ul>	on top and capped with 35' of cement (WOC and Ta	a)
<ul> <li>If the issue is a casing leak, isolate casing</li> </ul>		9)
<ul><li>Circulate packer plug</li><li>Run MIT for NMOCD</li></ul>		
RD pulling unit	1	Condition of Approval: notify
		OCD Hobbs office 24 hours
		ior of running MIT Test & Chart
	br.	M Oliuming sand
Spud Date:	Rig Release Date:	
Spud Dute.	Tig Release Dute.	
I hereby certify that the information above is	true and complete to the best of my knowledg	e and belief.
SIGNATURE Roni Mathe	TITLE Regulatory Analyst, S	r <sub>DATE</sub> _2/15/2022
Type or print name Roni Mathew	E-mail address: roni_mathew@	oxy.com PHONE: 713.215.7827
For State Use Only		
APPROVED BY:	TITLE_ Compliance Off	ien A DATE 3/2/22
Conditions of Approval (if any):	IIILE_ COMPANIE OF	UNIE_3/2/22
11 \ J/		





District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720

District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505** 

CONDITIONS

Action 81954

## **CONDITIONS**

Operator:	OGRID:
OCCIDENTAL PERMIAN LTD	157984
P.O. Box 4294	Action Number:
Houston, TX 772104294	81954
	Action Type:
	[C-103] NOI Workover (C-103G)

## CONDITIONS

Created By		Condition Date
kfortner	Run Post Workover MIT test	3/2/2022