

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

DISTRICT I
1625 N French Dr , Hobbs, NM 88240

DISTRICT II
1301 W Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

HOBBS OCD

1220 South St. Francis Dr.
Santa Fe, NM 87505

OCT 28 2011

RECEIVED

OIL CONSERVATION DIVISION

WELL API NO 30-025-36193	
5 Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6 State Oil & Gas Lease No	
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 24	
8 Well No	549
9. OGRID No	157984
10 Pool name or Wildcat	Hobbs (G/SA)

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)	
1 Type of Well Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2 Name of Operator Occidental Permian Ltd.	
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323	
4 Well Location Unit Letter <u>I</u> <u>1802</u> Feet From The <u>South</u> <u>815</u> Feet From The <u>East</u> Line Section <u>24</u> Township <u>18-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County	
11 Elevation (Show whether DF, RKB, RT GR, etc) 3656' GL	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER. Plug back/Sqz perfs/Return to producer <input checked="" type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

****supplemental C-103 for Notice of Intent filed 06/22/2011****

1. Kill well.
2. Plug back w/pea gravel to 4160'
3. RIH w/CICR and squeeze perfs per HES recommendations.
4. Drill out squeeze to PBTD @4370'. Test squeeze.
5. Run back in hole w/ESP and equipment.
6. Return well to production.

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

constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 10/27/2011
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only
APPROVED BY [Signature] TITLE SPM WGR DATE 10-31-2011
CONDITIONS OF APPROVAL IF ANY

OCT 31 2011