

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

HOBBS OCD

OIL CONSERVATION DIVISION

DISTRICT I  
1625 N French Dr, Hobbs, NM 88240

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

JAN 27 2012

DISTRICT II  
1301 W Grand Ave, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

RECEIVED

WELL API NO 30-025-29893
5 Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6 State Oil & Gas Lease No
7 Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
8 Well No 222
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"/>	8 Well No 222
2 Name of Operator Occidental Permian Ltd.	9 OGRID No 157984
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323	10 Pool name or Wildcat Hobbs (G/SA)
4 Well Location Unit Letter L 2019 Feet From The South 817 Feet From The West Line Section 34 Township 18-S Range 38-E NMPM Lea County	
11 Elevation (Show whether DF, RKB, RT GR, etc) '3625' 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____		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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Kill well.
2. POOH & lay down tubing & ESP equipment.
3. Clean out to 4080'.
4. RIH w/CIBP set @4050'. Cap w/35' of cement.
5. Test casing and chart for the NMOCD.
6. Install TA wellhead.

Top open perf @4140'

Condition of Approval : Notify OCD Hobbs  
office 24 hours prior to running MIT Test & Chart

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be 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 01/25/2012  
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxv.com TELEPHONE NO 806-592-6280

For State Use Only

APPROVED BY [Signature] TITLE State Engineer DATE 1/30/2012  
CONDITIONS OF APPROVAL IF ANY \_\_\_\_\_

JAN 31 2012