

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I  
1625 N French Dr, Hobbs, NM 88240

HOBBS OCD

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

DISTRICT II  
1301 W Grand Ave, Artesia, NM 88210

FEB 13 2012

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

RECEIVED

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 Temporarily Abandoned	WELL API NO 30-025-07591
2 Name of Operator Occidental Permian Ltd.	5 Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323	6 State Oil & Gas Lease No
4 Well Location Unit Letter L 1980 Feet From The South 660 Feet From The West Line Section 3 Township 19-S Range 38-E NMPM Lea County	7 Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
11 Elevation (Show whether DF, RKB, RT GR, etc ) 3613' DF	8 Well No 46
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	9 OGRID No 157984
	10 Pool name or Wildcat Hobbs (G/SA)

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"/> 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: <input type="checkbox"/>	OTHER: Casing Integrity Test/TA Status <input checked="" 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

Test date: 02/02/2012

Pressure readings: Initial - 550 PSI; 15 min - 540 PSI; 30 min - 535 PSI

Length of test: 30 minutes

Witnessed NO

CIBPs set @ 1735' & 3935'  
Top perf @ 3973'

This Approval of Temporary  
Abandonment Expires 2-2-2017

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 02/09/2012  
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 STAFF MGR DATE 2-15-2012  
CONDITIONS OF APPROVAL IF ANY

