Submit 1 Copy To Appropriate District 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

HOBBS OCD
MAR 0 8 2012
RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

WELL API NO. 30-025-35961

5. Indicate Type of Lease STATE ☒ FEE ☐

6. State Oil & Gas Lease No. B2656

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)

7. Lease Name or Unit Agreement Name
North Hobbs (G/SA) Unit Section 24 Conoco State

1. Type of Well: Oil Well ☐ Gas Well ☒ Other Injector

8. Well Number 3

2. Name of Operator
Oxy USA Inc

9. OGRID Number: 157984 16696

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

10. Pool name or Wildcat Hobbs (Drinkard)

4. Well Location
Unit Letter J : 2110 feet from the South line and 2055 feet from the East line
Section 33 Township 18S Range 38E NMPM Lea County

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
3652' KB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☒	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1) POOH with Prod
2) Clean out to 6590'
3) RIH with CIBP set at 6350'. Cap with 35' of cmt.
4) RUN MIT
5) Well is TA

Condition of Approval: the operator shall give 24 hour notice to the appropriate District office before work begins

Conditions of Approval: *Notify OCD district office 24 hours prior to running the TA pressure test.*

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 Steve Snead TITLE Lift Specialist DATE 3/6/2012

Type or print name Steve Snead E-mail address: steve_snead@oxy.com PHONE: (806) 592-6312

For State Use Only

APPROVED BY: Mark Whitaker TITLE Compliance Officer DATE 03-09-12

Conditions of Approval (if any):

MAR 12 2012

March 9, 2012

Work Plan Report for Well: CON-ST-3-DRK