

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

JUL 18 2012

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-07375
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 North Hobbs (G/SA) Unit Section 20
8 Well No 111
9 OGRID No 157984
10 Pool name or Wildcat Hobbs (G/SA)

1 Type of Well Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Temporarily Abandoned
2 Name of Operator Occidental Permian Ltd.
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323
4 Well Location Unit Letter D 330 Feet From The North 330 Feet From The West Line Section 20 Township 18-S Range 38-E NMPM Lea County
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3662' DF
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 <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER <input checked="" type="checkbox"/> Casing integrity test/TA status request

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: 07/04/2012

Pressure readings: Initial - 555PSI; 15 min - 530 PSI; 30 min - 520 PSI

Length of test: 30 minutes

Witnessed: No

CIBP set @4200'
Top perf @4285'

This Approval of Temporary
Abandonment Expires 7-4-2013

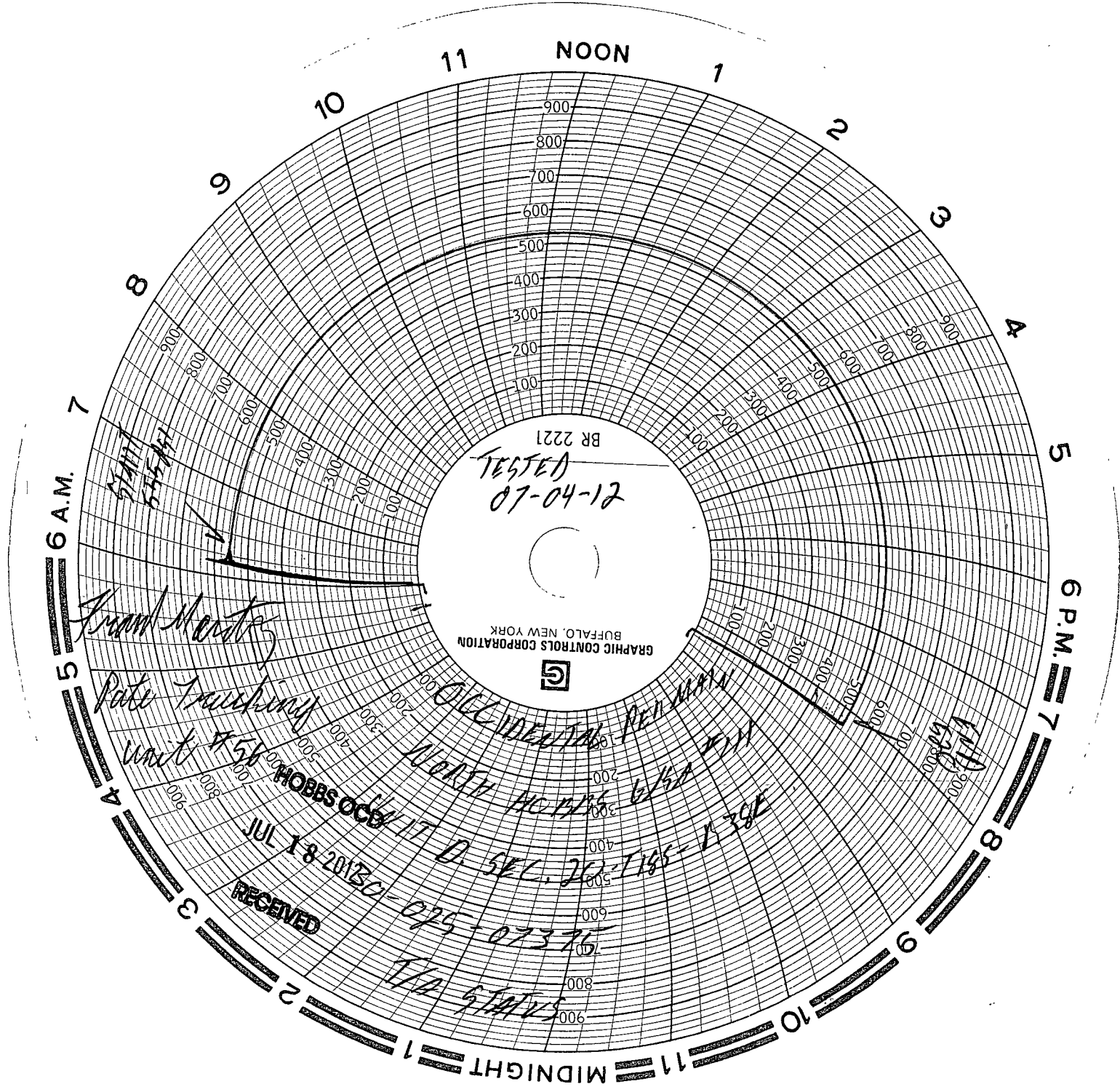
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 07/17/2012
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 DBT MGR DATE 7-19-2012
CONDITIONS OF APPROVAL IF ANY _____

JUL 19 2012



BR 2221

TESTED
07-04-12

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK



ALL IDENTICAL PENN

UNIT #56

HOBBS OCE

JUL 18 2015

RECEIVED

075-07375

TIA STATES

6 A.M.

6 P.M.

MIDNIGHT