

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

**DISTRICT II**  
1301 W Grand Ave, Artesia, NM 88210

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

**AUG 17 2012**

**RECEIVED**

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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)		WELL API NO 30-025-05509
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> <b>Injection</b> Temporarily Abandoned		5 Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2 Name of Operator Occidental Permian Ltd.		6 State Oil & Gas Lease No
3 Address of Operator HCR 1 Box 90 Denver City, TX 79323		7 Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 26
4 Well Location Unit Letter <b>A</b> <b>330</b> Feet From The <b>North</b> <b>330</b> Feet From The <b>East</b> Line Section <b>26</b> Township <b>18-S</b> Range <b>37-E</b> NMPM Lea County		8 Well No <b>411</b>
11 Elevation (Show whether DF, RKB, RT GR, etc) 3679' DF		9 OGRID No <b>157984</b>
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 _____		10 Pool name or Wildcat <b>Hobbs (G/SA)</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: <b>TA Status Extension Request</b> <input checked="" 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.

Run MI test to gain extension on temporary abandoned status..

**1YR ONLY**

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 <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>			
SIGNATURE <b>Mendy A Johnson</b>	TITLE <b>Administrative Associate</b>	DATE <b>08/15/2012</b>	
TYPE OR PRINT NAME <b>Mendy A. Johnson</b>	E-mail address <b>mendy_johnson@oxy.com</b>	TELEPHONE NO <b>806-592-6280</b>	
For State Use Only APPROVED BY <b>Mindy S Brown</b>	TITLE <b>Compliance Officer</b>	DATE <b>8/20/2012</b>	

**Conditions of Approval: Notify OCD District office 24 hours prior to running the TA Pressure Test.**

**AUG 20 2012**