State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE OIL C	ONSERVATION DIVISION	
DISTRICT I 1625 N French Dr , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505	WELL API NO 30-025-28362
DISTRICT II HOBBS OCD 1301 W Grand Ave, Artesia, NM 88210		5 Indicate Type of Lease STATE X FEE
DISTRICT III AUG 27 2012		6 State Oil & Gas Lease No
1000 Rio Brazos Rd, Aztec, NM 87410	DTO ON WELLS	7. Lease Name or Unit Agreement Name
SUNDRY NOTICES AND REPO (DO NOT USE THIS FORM FOR PROP RECEIVED ILL C		South Hobbs (G/SA) Unit
DIFFERENT RESERVOIR USE "APPLICATION FOR PER		
1 Type of Well Oil Well Gas Well	Other Temporarily Abandoned	8 Well No 159
2 Name of Operator Occidental Permian Ltd.	an ann An An	9 OGRID No 157984
3 Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR I Box 90 Denver City, TX 79323 4 Well Location		
Unit Letter F 2335 Feet From The North 1675 Feet From The West Line		
Section 9 Township	19-S Range 38-	E NMPM Lea County
11 Elevation (Show 3596' GL	whether DF, RKB, RT GR, etc)	
Pit or Below-grade Tank Application or Closure		
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 PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.		
PULL OR ALTER CASING Multiple Completion CASING TEST AND CEMENT JOB		
OTHER:	OTHER: MI Test/TA S	
 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. 		
Date of Test: 08/15/2012		
Pressure: Initial – 530 PSI; 15 min – 490 PSI; 30 min – 480 PSI		
Length of Test: 30 minutes		
Witnessed: No This Approval of Temporary 25-2013 Abandonment Expires		
CIBP @4009'		
Top perf @4060'		
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 p	permit or an (attached) alternativ	e OCD-approved
mand		
SIGNATURE I UNIT NAME Mendy A. Johnson E-m	TITLE Administrative	
TYPE OR PRINT NAME Mendy A. Johnson E-m For State Use Only	ail address: <u>mendy_johnson@oxy.com</u>	TELEPHONE NO 806-592-6280
APPROVED BY Chongaha TITLE Dist. MAR DATE 8-27-201		
CONDITIONS OF APPROVAL IF ANY		
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	,	AUG 2 7 2012

