

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 87401

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM

87505

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.

30-025-07525

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

SUNDRY RECEIPTS 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 ☒ Gas Well ☐ Other

2. Name of Operator

Occidental Permian Ltd.

3. Address of Operator

2611 Plains Hwy, Denver City, TX 79323

4. Well Location

Unit Letter P 32 feet from the North line and 2310 feet from the West line

Section 32

Township 18S

Range 38E

NMPM Lea

County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3638 GL

7. Lease Name or Unit Agreement Name

North Hobbs (G/SA) Unit

Section 32

8. Well Number 211

9. OGRID Number: 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:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

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 production equipment
2. Replace failed equipment
3. Run production equipment

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 Sneed

TITLE Lift Specialist

DATE 9/10/12

Type or print name Steve Sneed

E-mail address: steve_sneed@oxy.com PHONE: 806-592-6312

For State Use Only

APPROVED BY:

[Signature]

TITLE

Dist MGR

DATE

9-27-2012

Conditions of Approval (if any):

SEP 27 2012