Submit I Copy To Appropriate District	State of New Mexico		Form C-103
Office District I – (575) 393-6161  MOBBS OCEnergy, Minerals and Natural Resources		ources Re	evised August 1, 2011
1625 N. French Dr. Hobbs, NM 88240		WELL API NO.	
District II - (575) 748-1283 811 S First St., Artesia, NM 88210CT 2 5 2002 L CONSERVATION DIVISION District III - (505) 334-6178		ION 30-025-12493	
District III – (505) 334-6178 1220 South St. Francis Dr.		5. Indicate Type of Lea STATE	se FEE ⊠
1000 Rio Brazos Rd , Aztec, NM 87410	Santa Fe NM 87505	6. State Oil & Gas Leas	
District IV - (505) 476-3460 1220 S St Francis Dr , Santa Fe, NM <b>RECEIVE</b>		o. State Off & Gas Leas	ic No.
8/303			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit	
(DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR USE "APPLICATION	D DRILL OR TO DEEPEN OR PLUG BACK FOR PERMIT" (FORM C-101) FOR SUCH	, ,	nit
PROPOSALS)	TORTERIMIT (FORM C 101) FOR SOCI	Section 20	
1. Type of Well: Oil Well 🛛 Gas W	ell Other	8. Well Number 241	
2. Name of Operator		9. OGRID Number: 15	7984
Occidental Permian Ltd.			
3. Address of Operator		10. Pool name or Wildo	eat Hobbs (G/SA)
2611 Plains Hwy Denver City, TX 79323	·		
4. Well Location			
Unit Letter N: 330 feet from the South line and 2310 feet from the West line			
Section 20 Township 18S Range 38E NMPM Lea County			
	Elevation (Show whether DR, RKB, R	T, GR, etc)	
3652	2 GL		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTEN		SUBSEQUENT REPOR	
<del></del>		<del></del>	RING CASING
TEMPORARILY ABANDON			D A 🔲
	TIPLE COMPL   CASIN	G/CEMENT JOB	
DOWNHOLE COMMINGLE			
OTHER:	☐ OTHE	<b>5</b> .	
			uding estimated date
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 equip.			
2) Clean out to 4420			
3) Perforate from 4183-4205'			
4) Acid treat with 960 gal.			
5) RIH with ESP 6) Return well to production			
6) Return well to production			
Spud Date:	Rig Release Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
$\leftarrow$			
SIGNATURE Sleve Sylves TITLE Lift Specialist DATE 10/4/2012			
Type or print name Steve Snead E-mail address: steve snead@oxy.com PHONE: 806-592-6312			
For State Use Only			
APPROVED BY: TITLE DIST. MGZ DATE 10-31-20			
Conditions of Approval (if any):			
Conditions of Approval (inally).			