

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 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

HOBBS OCD
 FEB 05 2013
 RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

SUNDRY NOTICES 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.)		WELL API NO. 30-025-07462
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Occidental Permian Ltd.		6. State Oil & Gas Lease No.
3. Address of Operator 2611 Plains Hwy Denver City, TX 79323		7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 30
4. Well Location Unit Letter <u>F</u> : <u>2310'</u> feet from the <u>North</u> line and <u>2310'</u> feet from the <u>West</u> line Section <u>30</u> Township <u>18S</u> Range <u>38E</u> NMPM Lea County		8. Well Number <u>221</u>
11. Elevation (Show whether DR, Rk.B, RT, GR, etc.) 3660.8 GL		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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input 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 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 4279
- 3) Run pkr. Set at 3980'
- 4) Run prod flow log. Identify high GOR layers
- 5) POOH with pkr
- 6) Sqz high GOR layers
- 7) Do cmt sqz.
- 8) 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.

SIGNATURE Steve Snead TITLE Lift Specialist DATE 1/17/13

Type or print name Steve Snead E-mail address: steve_snead@oxy.com PHONE: 806-592-6312
 For State Use Only

APPROVED BY [Signature] TITLE Dist. Mgr DATE 2-6-2013

FEB 06 2013