

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 OCEAN OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
 APR 19 2013

WELL API NO. 30-025-07603	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	<input checked="" type="checkbox"/>
7. Lease Name or Unit Agreement Name South Hobbs Unit	<input checked="" type="checkbox"/>
8. Well Number 20	<input checked="" type="checkbox"/>
9. OGRID Number: 157984	<input checked="" type="checkbox"/>
10. Pool name or Wildcat Hobbs (G/SA) Grayburg-San Andres	<input checked="" type="checkbox"/>

**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.)

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 D : 660 feet from the North line and 660 feet from the West line  
 Section 3 Township 19S Range 38E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3621' KB

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 checked="" 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 4080'
- 3) Set CIBP at 4000'. Cap with 35' of cmt.
- 4) Run MIT
- 5) Well is TA

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 4/8/13

Type or print name Steve Snead E-mail address: steve\_snead@oxy.com PHONE: 806-592-6312

For State Use Only  
 APPROVED BY: Mark Whitman TITLE Compliance Officer DATE 04-19-2013

Conditions of Approval (if any):

APR 22 2013