

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 5-27-2004

FILE IN TRIPLICATE

**OIL CONSERVATION DIVISION**

1220 South St. Francis Dr.  
Santa Fe, NM 87505

**DISTRICT I**  
1625 N. French Dr., Hobbs, NM 88249  
**HOBBS OCD**

**DISTRICT II**  
1301 W. Grand Ave., Artesia, NM 88210  
**MAY 23 2013**

**DISTRICT III**  
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-28544
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit Section 9
8. Well No. 171
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

**RECEIVED**

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 Temporarily Abandoned

2. Name of Operator  
Occidental Permian Ltd.

3. Address of Operator  
HCR I Box 90 Denver City, TX 79323

4. Well Location  
Unit Letter D : 710 Feet From The North 640 Feet From The West Line  
Section 9 Township 19-S Range 38-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)  
3638' DF

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 <input 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"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Casing integrity test/TA status request</u> <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Date of test: 05/15/2013  
Pressure readings: Initial - 560 PSI; 15 min - 560 PSI; 30 min - 558 PSI  
Length of test: 30 minutes  
Witnessed: NO  
CIBP set @3990'  
Top perf @4140'

This Approval of Temporary Abandonment Expires 5-15-2014

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 permit  or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 05/21/2013  
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only  
APPROVED BY [Signature] TITLE DIST MGR DATE 5-28-2013  
CONDITIONS OF APPROVAL IF ANY \_\_\_\_\_

**MAY 28 2013**

PRINTED IN U.S.A.

6 PM

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11

MIDNIGHT

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6 AM

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NOON

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TESTED  
05-15-13

DATE

BR 2221

Graphic Controls

START  
5:00 PM

OCCIDENTAL DELTA  
SPRINT DELTA  
UNIT A DELTA 217 C/SR  
DATA TO DELTA 217 C/SR

RECEIVED

MAY 23 2013

RECEIVED

START  
5:00 PM

MAY 23 2013

RECEIVED