Submit I Copy To Appropriate District State of New Mexico Office	FORM C-105
Lingray, Minarale and Natural Recources	Revised August 1, 2011
District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 DBS OCD	WELL API NO. 30-025-2 352 2 36149
OIL CONSERVATION DIVISION	
District III - (505) 334-6178 JUL 1 5 2013 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 Sonta Fe NM 87505	
	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	North Hobbs (G/SA) Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Section 32
PROPOSALS.) 1. Type of Well: Oil Well ⊠ Gas Well □ Other	8. Well Number 537
2. Name of Operator	9. OGRID Number: 157984
Occidental Permian Ltd.	y. GGRID Manior. 12790
3. Address of Operator	10. Pool name or Wildcat
2611 Plains Hwy, Denver City, TX 79323	Hobbs (G/SA)
4. Well Location	
Unit Letter B : 876 feet from the North line and 1403	feet from the East line
Section 32 Township 18S Range 38-	
11. Elevation (Show whether DR, RKB, RT, GR, etc. 3641' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐	
TEMPORARILY ABANDON	
PULL OR ALTER CASING │ MULTIPLE COMPL	<u> </u>
DOWNHOLE COMMINGLE	
	N.
OTHER: 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 PLIDII and DOOH W/CSD aguinment	
 RUPU and POOH W/ESP equipment RIH W/ESP equipment and set motor @4102' 	
3. RDPU and clean location	
5. ROT 6 und cicum tocation	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.
\mathcal{L}	
SIGNATURE Steve Mose TITLE Lift Specialist DATE 7/8/2013	
Type or print name Steve Snead E-mail address: steve_snead@oxy.cc	om_PHONE: 806-592-6312
For State Use Only	
APPROVED BY: Maley & Brown TITLE Compliance Office DATE 7/16/2013	
APPROVED BY: / UMUL DIOWN TITLE COMPLIANCE	2) Coffice Date 1/16/CD13
Conditions of Approval (if any):	