Submit 1 Copy To Appropriate District	State of New Me	Form C-103				
Office <u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised August 1, 2011			
1625 N. French Dr., Hobbs, NM 88240	525 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-025-26834			
811 S. First St., Artesia, NM 88210				Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE S			
<u>District IV</u> – (505) 476-3460	trict IV – (505) 476-3460 Santa Fe, NIVI 8/303			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease N	ame or Unit Agreen	nent Name	
(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			North Hobb	os C/SA		
PROPOSALS.)				8. Well Number		
1. Type of Well: Oil Well Gas Well Other June OCD			33-232			
2. Name of Operator Occidental Permian Ltd.			9. OGRID Number: 157984			
Occidental Permian Ltd.  3. Address of Operator			10. Pool name or Wildcat Hobbs (G/SA)			
HCR 1 Box 90 Denver City, TX 79323			10. 100111	inie or windear from	703 (0/3/1)	
4. Well Location RECEIVED						
Unit Letter K: 1595 feet from the South line and 1370 feet from the West line						
Section 33	Township 18S	Range 38E	E N	IMPM Lea	County /	
	11. Elevation (Show whether DR,	, RKB, RT, GR, etc.	)			
	3647' KB					
12 Classia A		CNI-4	D	241 D - 4 -		
12. Check Ap	propriate Box to Indicate N	ature of Notice,	Report or C	Ither 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   CASING/CEMENT DOWNHOLE COMMINGLE			I JOB			
BOWN TOLL COMMINGEL						
OTHER: Coiled Tubing Cleanout		OTHER:				
13. Describe proposed or complet						
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.						
proposed completion of recon	ipiction.					
<ol> <li>Rig up Coiling Tubing Unit w</li> <li>TIH to 4395'</li> </ol>	ith Perf Clean Tool					
<ul><li>2) TIH to 4395'</li><li>3) Pull up with perf clean tool to 4000'</li></ul>						
4) Run perf clean tool with water across perforations 4044-4186''						
<ul> <li>5) Close backside and repeat perf wash from 4044-4186' with 2500 gals 15% NEFE HCL</li> <li>6) Pump 10 bbls gel sweep to bring fines to the surface</li> </ul>						
<ul><li>6) Pump 10 bbls gel sweep to br.</li><li>7) POOH with CT and RD Coil '</li></ul>		Per &	00-0-1	-nC		
8) Return well to injection					`	
	, <b>D</b> r	uring this prod	edure we	plan to use the	<u>.</u>	
	cl	osed-loop sys	tem with a	steel tank and	1	
CONDITION OF APPROVAL: OPERATOR	Rele ha	aul contents to	the requi	red disposal,		
DISTRICT OFFICE 24 HOURS NOTICE BE	FORE WORK BEGINS.	er OCD Rule 1	9.15.17.			
	\					
I hereby certify that the information ab	ove is true and complete to the be	est of my knowledg	ge and belief.			
SIGNATURE TITLE Injection Well Analyst DATE 7-15-13						
Type or print nameRobbie Underhill E-mail address: Robert Underhill@oxy.com PHONE: 806-592-6287						
For State Use Only						
Conditions of Approval (if any):						
Conditions of Approval (if any):						
			Mr 23	7610 I		