

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

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

WELL API NO. 30-025-31655
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 North Hobbs G/SA
8. Well Number 332
9. OGRID Number: 157984
10. Pool name or Wildcat Hobbs (G/SA)

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 **HOBS OCD**

2. Name of Operator
Occidental Permian Ltd. **JNS**

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323 **RECEIVED**

4. Well Location
 Unit Letter **G**: 2470 feet from the North line and 1800 feet from the East line
 Section 28 Township 18S Range **31** ~~37~~E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3652' KB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: Coiled Tubing Cleanout <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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) Rig up Coiling Tubing Unit with Perf Clean Tool
- 2) TIH to 4380'
- 3) Pull up with perf clean tool to 4230'
- 4) Run perf clean tool with water across perforations 4278-4330'
- 5) Close backside and repeat perf wash from 4278-4330' with 2000 gals 15% NEFE HCL
- 6) Pump 10 bbls gel sweep to bring fines to the surface
- 7) POOH with CT and RD Coil Tubing Unit
- 8) Return well to injection

Per Operator

CONDITION OF APPROVAL: OPERATOR SHALL GIVE THE OCD DISTRICT OFFICE 24 HOURS NOTICE BEFORE WORK BEGINS.

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal, per OCD Rule 19.15.17.

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 *Robbie Underhill* TITLE Injection Well Analyst DATE 7-15-13

Type or print name Robbie Underhill E-mail address: Robert_Underhill@oxy.com PHONE: 806-592-6287

For State Use Only
 APPROVED BY: *Mark Whitaker* TITLE Compliance Officer DATE 7-26-2013

JUL 29 2013