Submit I Copy To Appropriate District Office	State of New Me	exico	Form C-103
District I (575) 202 (1/1	Energy, Minerals and Natu	ral Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-025-27243
District III - (505) 334-6178	2520 1 3 220 South St. Fran	ncis Dr	5. Indicate Type of Lease
1000 KIO BIAZOS Kd., AZICC, NIVI 87410 JUL	Santa Fe, NM 87	7505	STATE FEE -
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	ŕ	7303	6. State Oil & Gas Lease No.
87505 St. Prairies Dr., Santa Pe, NW	ECEIVED		
	AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS			
DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	ON FOR PERMIT" (FORM C-101) FO	OR SUCH	North Hobbs G/SA
1. Type of Well: Oil Well To Cas Well To Other		8. Well Number	
7.	Well Die INJECT	TUR)	28-422
2. Name of Operator			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			
4. Well Location			
Unit LetterH_:2199_	feet from theNorth lin	ne and772	_feet from theEastline
Section 28	Township 18S	Range 37E	SE NMPM Lea County
11	. Elevation (Show whether DR		
36	649' KB		
			, , , , , , , , , , , , , , , , , , ,
12. Check Appr	ropriate Box to Indicate N	ature of Notice	Report or Other Data
12. G. G. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	opriate Bon to marcare 1		report of other Bata
NOTICE OF INTE	NTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR		K ALTERING CASING	
TEMPORARILY ABANDON CH	HANGE PLANS	COMMENCE DRI	ILLING OPNS. P AND A
PULL OR ALTER CASING MI	ULTIPLE COMPL ☐	CASING/CEMEN	T JOB 🔲
DOWNHOLE COMMINGLE /	•		
/			<u></u>
OTHER: Coiled Tubing Cleanout		OTHER:	
13 Describe proposed or completed	Longrations (Clearly state all	portinant dataila an	d give pertinent dates, including estimated date
			d give pertinent dates, including estimated date mpletions: Attach wellbore diagram of
proposed completion or recomp		. Por whitiple Col	inpletions. Attach wendore diagram of
proposed completion of recomp	iction.		
1) Rig up Coiling Tubing Unit with	n Perf Clean Tool		
2) TIH to 4380'			
3) Pull up with perf clean tool to 4.	500'		
4) Run perf clean tool with water across perforations 4240-4270'			
5) Close backside and repeat perf wash from 4240-4270' with 2000 gals 15% NEFE HCL			
Pump 10 bbls gel sweep to bring			
7) POOH with CT and RD Coil Tu	ibing Unit		
8) Return well to injection			
		During this r	procedure we plan to use the
		closed-loon	system with a steel tank and
	`	haul content	s to the many in the
CONDITION OF APPROVAL: Notify OCD DISTR	ICT OFFICE 24 HOURS Lelease [nor OCD D	s to the required disposal,
prior to STARTING THE WORKOVER		per OCD Rule	e 19.15.17.
I hereby certify that the information above	ve is true and complete to the b	est of my knowledg	e and helief
Thereby cortiny that the information abov	e is true and complete to the Bo	est of my knowledg	e and benef.
\sim			
SIGNATURE /	TITLEInjectio	n Well Analyst	DATE 7-17-13
Type or print nameRobbie Underhi	II E-mail address:_R	obert Underhill@o	oxy.com PHONE: 806-592-6287
For State Use Only	1		
5/1		~ L - n-	7-20 0013
APPROVED BY	TITLE D	SI. Mise	DATE -CJ-CO13
Conditions of Approval (if any).		•	•
			JUI 29 2012
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