Submit 1 Copy To Appropriate District Office	State of New Me	xico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natur	ral Resources	, Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210		DIVISION	30-025-07375
District III - (505) 334-6178	t III = (505) 334-6178 1220 South St. Francis Dr		5. Indicate Type of Lease
Conto I/o NINI U/A/IA		STATE FEE 6. State Oil & Gas Lease No.	
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Banta 1 c, 14141 67	303	6. State Oil & Gas Lease No.
87505	-n /ED		
SUNDRY NOTICE	S 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 PROPOSALS.)		Section 20	
1	as Well 🔲 Other		8. Well Number 111
2. Name of Operator			9. OGRID Number: 157984
Occidental Permian Ltd.			
3. Address of Operator			10. Pool name or Wildcat Hobbs (G/SA)
2611 State Hwy 214 Denver City, TX 79323		`, `	
4. Well Location			
$m{\ell}$			
Unit Letter D: 330 feet from the North line and 330 feet from the West line			
Section 20	Township 18S	Range 38	
	11. Elevation (Show whether DR,	RKB, RT, GR, etc.	
	3660.8 GL		
•			
12. Check App	propriate Box to Indicate Na	ature of Notice,	Report or Other Data
NOTICE OF INTENTION TO:			
			SEQUENT REPORT OF:
	_		-
· <u></u>	MULTIPLE COMPL	CASING/CEMEN	T JOB
DOWNHOLE COMMINGLE			
OTHER:		OTHER:	П
	ed operations (Clearly state all r		d give pertinent dates, including estimated date
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.			
proposed compression of recom-	pietem	•	
1) Clean out to 3977			
2) Set RBP at 1000'			
3) Switch out wellhead			
4) Pull RBP.			edure we plan to use
5) Clean Out to 4270'	LITE CIUSCU IOOD		system with a steel
6) Perforate from 4181-83' and 4192-4217' tank and haul co		ntents to the required	
7) Acid treat with 1500 gal.		disposal per ODC	
8) RIH with ESP		alsposal per Obe	. Haic 15.15.17
9) Return well to production			
AFTER RETURNING THIS WELL TO AFTER RETURNING THIS WITH date of the control of the	DUCTION;		
AFTER RETURNING THIS WELL TO AFTER RETURNING THIS WITH date of the control of the	O PRODUCTIPITION \		
AFTER RETURNING THIS WELL TO AFTER RETURNING THIS WITH date of work done. Also form C-104 with date of work done. Also form, Tubing six of work done. Also from, Tubing six of work done. Also from, Tubing six of work done.	tes and unportors,		
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of work done of wo	- * *		•
I he life information above is true and complete to the best of my knowledge and belief.			
and the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE Lift Specialist DATE 9/30/2013			
SIGNATURE Olove Or	ΠΙΕΕ_Liπ Spe	ecianst	DATE <u>9/30/2013</u> .
T		. 10	200 200 200
Type or print name _ Steve Snead E-mail address: steve_snead@oxy.com PHONE: _806-592-6312			
For State Use Only			
ADDROVED BY OF	TITLE VI	St MKD	DATE 0-2-2013
APPROVEDBY	IIILE TO	11/41	DAIROCOL)

OCT 0 2 2013