

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
HOBBS OGD
NOV 27 2013
RECEIVED
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

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.)		WELL API NO. 30-025-28984
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injector <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Occidental Permian Ltd.		6. State Oil & Gas Lease No.
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323		7. Lease Name or Unit Agreement Name South Hobbs G/SA
4. Well Location Unit Letter <u> </u> P <u> </u> : <u> </u> 945 <u> </u> feet from the <u> </u> South <u> </u> line and <u> </u> 270 <u> </u> feet from the <u> </u> East <u> </u> line Section <u> </u> 5 <u> </u> Township <u> </u> 19S <u> </u> Range <u> </u> 38E <u> </u> NMPM <u> </u> Lea <u> </u> County <u> </u>		8. Well Number 193
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3617' KB		9. OGRID Number: 157984
10. Pool name or Wildcat Hobbs (G/SA)		10. Pool name or Wildcat Hobbs (G/SA)

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 DOWNHOLE COMMINGLE

OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB

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.

- Rig up Coiling Tubing Unit with Perf Clean Tool
- TIH to 4275'.
- Run perf clean tool with water across perforations 4124-4226'.
- Close backside and repeat perf wash from 4124-4226' with 2500 gals 15% NEFE HCL
- Pump 10 bbls gel sweep to bring fines to the surface
- POOH with CT and RD Coil Tubing Unit
- Return well to injection

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal per ODC 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 11-20-13

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

APPROVED BY: Mark Whitaker TITLE Compliance Officer DATE 12-2-2013

CONDITION OF APPROVAL: Operator shall give the OCD District Office 24 hour notice before running the MIT test and chart.

← If pkt or thg is moved

DEC 02 2013