Submit I Copy To Appropriate District	State of New Mexico	Form C-103
Office District I (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION DIVISION	30-025-05463
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa I C, INVI 67505	6. State Oil & Gas Lease No.
87505 SLINDRY NOTICE	ES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSA	LS TO DRILL OR TO DEEPEN OR PHAIG BACK TO A	North Hobbs (G/SA) Unit
DIFFERENT RESERVOIR. USE "APPLICA"	LS TO DRILL OR TO DEEPEN OR PLUS BACK TO A TION FOR PERMIT" (FORM C-101) TO BESOCO	Section 23
PROPOSALS.)	Will D Office	8. Well Number 321
	as Well Other Injector JAN - 3 2014	
2. Name of Operator	0 2011	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 7932	RECEIVED	10. Foot hame of whiteat Hoods (G/3A)
4. Well Location		
	0 fact from the North line and 1650) fast from the East line
	0feet from theNorth line and1650	
Section 23		7E NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, et	(C.)
	3688 KB	
		D out D
12. Check Ap	propriate Box to Indicate Nature of Notice	e, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐		
		RILLING OPNS. P AND A
	MULTIPLE COMPL CASING/CEME	
DOWNHOLE COMMINGLE	VIOLITI LE GOIVILE	
DOWNTOLE COMMINGLE		
OTHER:	OTHER:	
13. Describe proposed or complet	ed operations. (Clearly state all pertinent details, a	and give pertinent dates, including estimated date
). SEE RULE 19.15.7.14 NMAC. For Multiple C	Completions: Attach wellbore diagram of
proposed completion or recon	ipletion.	
	During	this procedure we plan to use
the closed loop system with		sed-loon system with a steel
April 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		and haul contents to the required
		old had contents to the required
 Acid treat w/ 2000 gal 15% NEFE acid per prog RIH w/ injection equipment and return to injection. disposal per ODC Rule 19.15.17 		
4. Kitt w/ injection equipment and return to injection.		
Spud Date:	Rig Release Date:	
I hereby certify that the information about	ove is true and complete to the best of my knowled	dge and belief.
- 1		
SIGNATURE & CWC	TITLE_Injection Well AnaylstDATE_	12.26.12
SIGNATURE WOV	THE_injection well AnalystDATE_	12-20-13
Type or print name Robbie Underhil	E-mail address: <u>Robert Underhill@oxy.co</u>	m PHONE: 806-592-6287
For State Use Only	Λ	
M VI JH	ν	60 · 1.1/
APPROVED BY:	DIOWN TITLE COMPliance	Officer DATE 1/6/2014
CONDITION OF 1		4)
CONDITION OF APPROVAL: Notify OCD DISTR prior to STARTING THE WORKOVER.	ICT OFFICE 24 HOURS CONDITION OF AP	PROVAL: Operator shall give the OCD

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