Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
District 1 (575) 203 6161 Ener	gy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 HOBBS OC	2	WELL API NO.
	CONSERVATION DIVISION	30-025-38114 5. Indicate Type of Lease
District III - (505) 334-6178 APR 0 4 20	1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505 RECEIVEL		
SUNDRY NOTICES AND (DO NOT USE THIS FORM FOR PROPOSALS TO DR DIFFERENT RESERVOIR. USE "APPLICATION FOR	REPORTS ON WELLS ILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 18
PROPOSALS.) 1. Type of Well: Oil Well ⊠ Gas Well	Other	8. Well Number 518
Type of Well: Oil Well		9. OGRID Number: 157984
Occidental Permian Ltd.		7. OOKID Number: 137704
3. Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR I Box 90 Denver City, TX 79323		
4. Well Location		
Unit Letter M: 275 feet from the South line and 1030 feet from the West line		
Section 18		8E NMPM Lea County
NEW PARTIES AND	ition (Show whether DR, RKB, RT, GR, et	C.)
3642' KI)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	ID ABANDON REMEDIAL WO	
TEMPORARILY ABANDON CHANGE	PLANS 🔲 COMMENCE DI	RILLING OPNS. P AND A
·	E COMPL CASING/CEME	NT JOB 🔲
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER:	П
		nd give pertinent dates, including estimated date
of starting any proposed work). SEE F	CULE 19.15.7.14 NMAC. For Multiple C	
proposed completion or recompletion.		
1) POOH with inj. equip.		
2) Clean out to 4448' and deepen to 4480'		
3) Run a cased hole CNL/GR/CCL		
4) Perforate 4328-33, 4345-61', 4363-74', 4378-85' + additional perfs picked from cased hole log.		
5) Acidize well per updated design 6) RIH w/ dual injection pkr equip. During this procedure we plan to use		
7) Return well to production the closed-loop system with a steel		
•	tank and haul contents to t	
disposal per ODC Rule 19.15.17		
Spud Date:	Rig Release Date:	
hereby certify that the information above is tru	e and complete to the best of my knowled	ge and belief
	e and complete to the best of my knowled	go and benefi.
SIGNATURE K. A.	TITLE_Injection Well Analyst	DATE_4-1-14
Type or print name Robbie Underhill	E-mail address: Robert Underhill@oxy.c	om PHONE: 806 502 6287
For State Use Only	A man address. Robert Onderningwoxy.c	000-392-0287
$\sim 10^{-1}$		
APPROVED BY: WARE STORY TITLE COMPLIANCE THE DATE H 4 2019		
Conditions of Approval (if any)	j	•