

FILE IN TRIPLICATE

DISTRICT I
 1625 N. French Dr., Hobbs, NM 88240

APR 09 2014

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
 Santa Fe, NM 87505

DISTRICT II
 1301 W. Grand Ave, Artesia, NM 88210

RECEIVED

DISTRICT III
 1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-05450
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 14
8. Well No. 341
9. OGRID No. 157984
10. Pool name or Wildcat Hobbs (G/SA)

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Occidental Permian Ltd.

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location
 Unit Letter O : 660 Feet From The South Line and 1650 Feet From The East Line
 Section 14 Township 18-S Range 37-E NMPM Lea County

11. Elevation (Show whether DF, RKB, RT GR, etc.)
 3676' GL

Pit or Below-grade Tank Application or Closure
 Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____	<input type="checkbox"/>	OTHER: _____	<input type="checkbox"/>

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- RUPU & RU.
- ND wellhead/NU BOP.
- POOH and lay down ESP equipment.
- RIH w/bit. Tag @4329'. POOH w/bit.
- RIH w/treating packer set @4140'. RU Rising Star and pump 2000 gal of 15% PAD acid with 2000# gelled rock salt block in two settings. Flush with 50 bbl fresh water. RD Rising Star. RU pump truck & pump 100 bbl fresh water mixed w/60 gal of EC6490 chemical. Flush w/100 bbl brine water flush. RD pump truck. POOH w/treating packer.
- RIH w/ESP equipment set on 122 jts of 2-7/8" tubing. Intake set @4027'.
- ND BOP/NU wellhead.
- RDPU & RU. Clean location and return well to production.

RUPU 02/27/2014 RDPU 03/05/2014

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

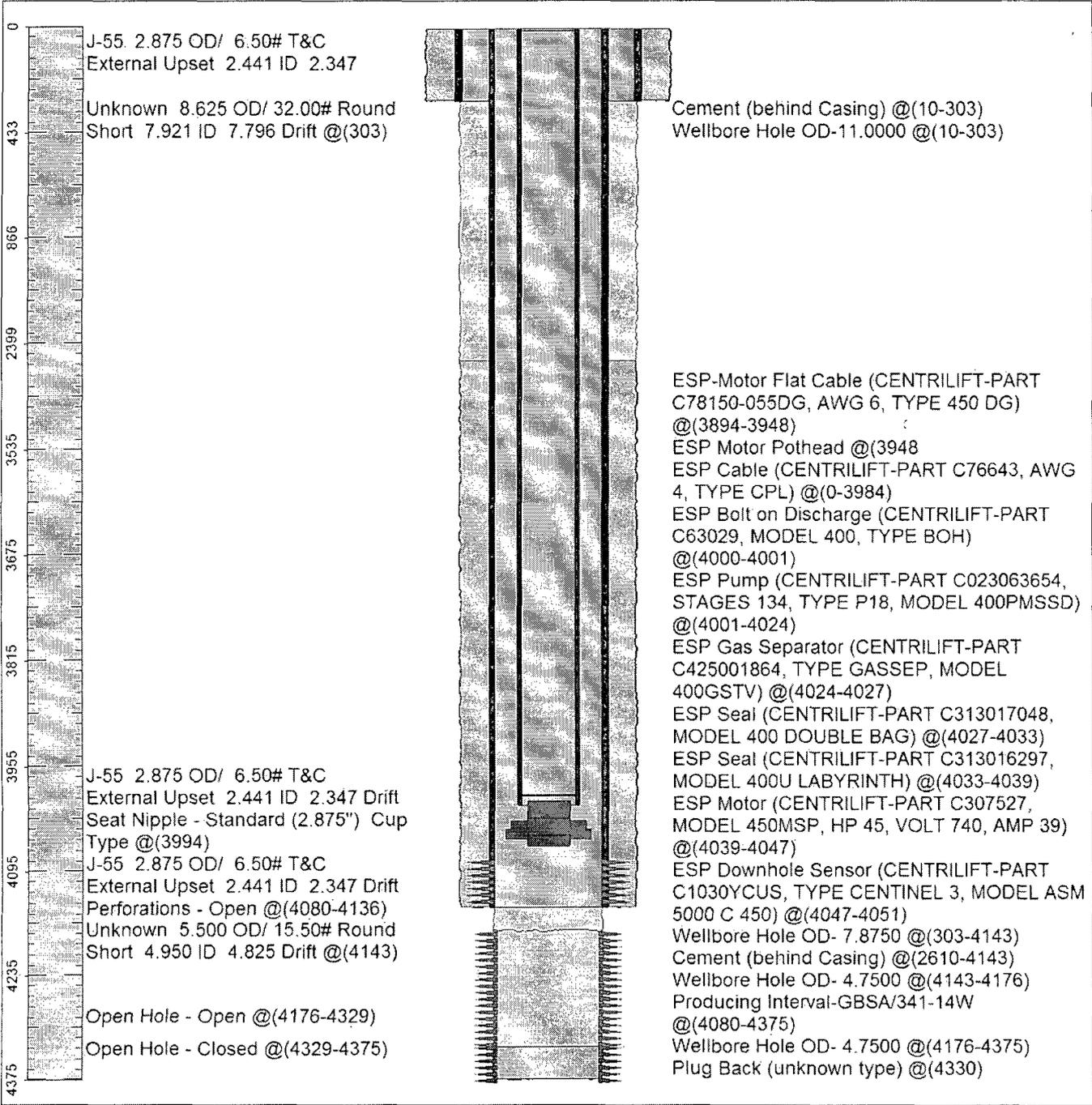
SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 04/08/2014
 TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only
 APPROVED BY [Signature] TITLE Petroleum Engineer DATE APR 14 2014
 CONDITIONS OF APPROVAL IF ANY:

APR 14 2014

April 4, 2014

Work Plan Report for Well:NHSAU 341-14



Survey Viewer