State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

HOBBS OCD OIL CONSERVATION DIVISION

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

JUL 01 2014

RECEIVED

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

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

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.
30-025-05488

5. Indicate Type of Lease
STATE [X]   FEE [ ]

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
North Hobbs (G/SA) Unit
Section 24

1. Type of Well:
Oil Well [ ]   Gas Well [ ]   Other   Injector

8. Well No.   331

2. Name of Operator
Occidental Permian Ltd.

9. OGRID No.   157984

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

10. Pool name or Wildcat   Hobbs (G/SA)

4. Well Location

Unit Letter   J   :   1320   Feet From The   South   Line and   1325   Feet From The   East   Line

Section   24   Township   18-S   Range   37-E   NMPM   Lea   County

11. Elevation (*Show whether DF, RKB, RT GR, etc.*)
3658' 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 [ ] PLUG AND ABANDON [ ]		REMEDIAL WORK [ ] ALTERING CASING [ ]	
TEMPORARILY ABANDON [ ] CHANGE PLANS [ ]		COMMENCE DRILLING OPNS. [ ] PLUG & ABANDONMENT [ ]	
PULL OR ALTER CASING [ ] Multiple Completion [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: _____ [ ]		OTHER: Casing Integrity Test [X]	

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.

Date of Test: 06/11/2014

Pressure Readings: Initial – 720 PSI; 15 min – 720 PSI; 30 min – 720 PSI

Length of test: 30 minutes

Witnessed: NO

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   06/27/2014

TYPE OR PRINT NAME   Mendy A Johnson   E-mail address: mendy_johnson@oxy.com   TELEPHONE NO.   806-592-6280
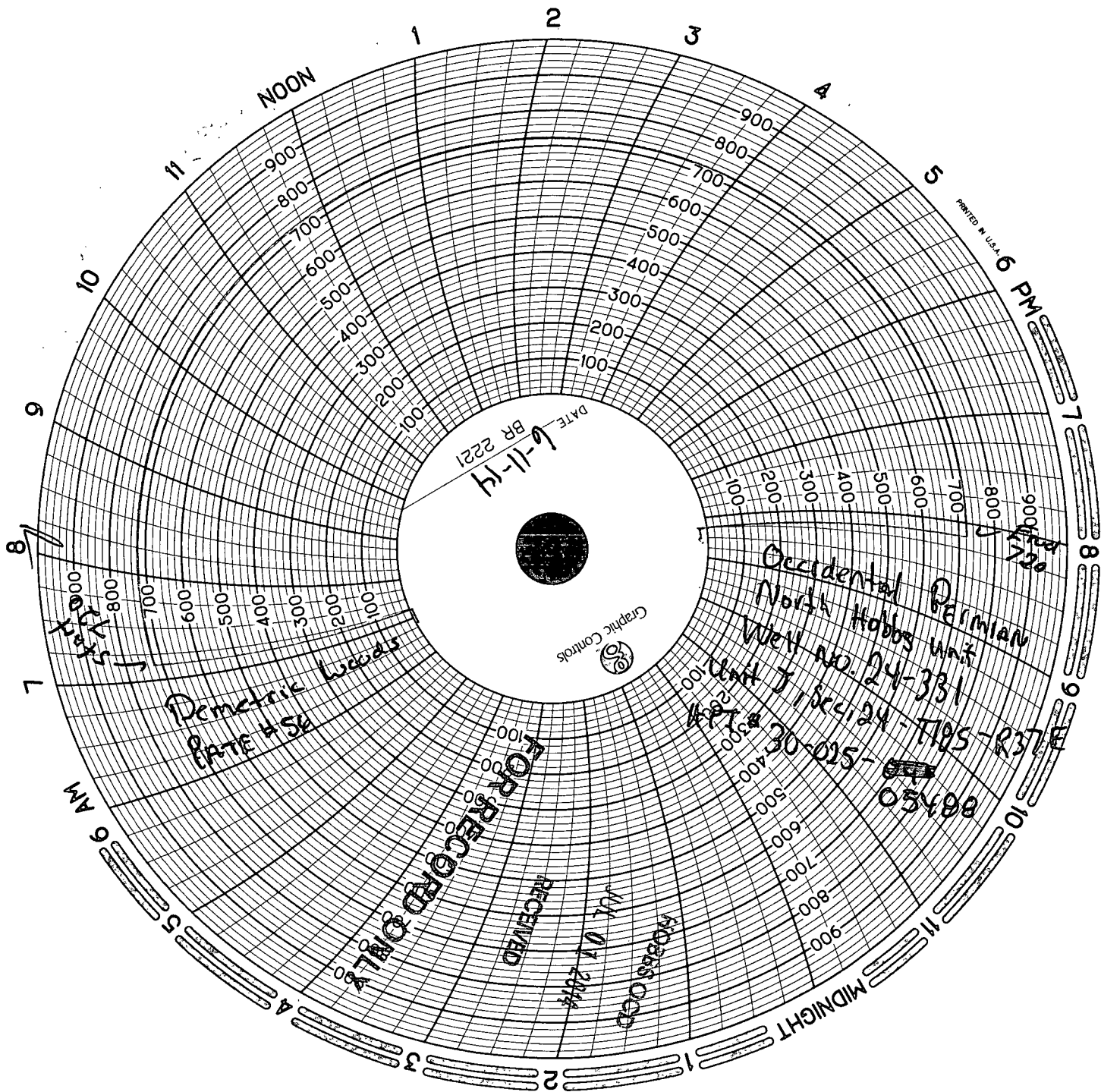
For State Use Only

APPROVED BY   *Bill Jenamah*   TITLE   *Staff Manager*   DATE   7/8/2014

CONDITIONS OF APPROVAL IF ANY:

JUL 14 2014

Circular chart recorder. Visible handwritten and printed annotations:

- DATE 6-11-14
- BR 2221
- Graphic Controls
- PRINTED IN U.S.A.
- Demetric Woods
- DATE 4-56
- FOR RECORD ONLY
- RECEIVED
- VOL. 70 10.20%
- CO2 5820.04
- Occidental Permian
- North Hobbs Unit
- Well No. 24-331
- Unit J Sec 24 - T18S - R37E
- API # 30-025-05498
- start
- 7/11/14
- End 720
- Time markings: NOON, 1, 2, 3, 4, 5, 6 PM, 7, 8, 9, 10, 11, MIDNIGHT, 1, 2, 3, 4, 5, 6 AM, 7, 8, 9, 10, 11
- Scale markings: 100, 200, 300, 400, 500, 600, 700, 800, 900

American Valve & Meter, Inc.
1113 W. Broadway
P.O. Box 166
Hobbs New Mexico 88240

To: _Pate Trucking   Date_04/09/14

This is to certify that:

I _Bud Collins_____Technician for American Valve & Meter Inc. has checked

the calibration of the following instrument.

8" pressure recorder_   Serial No. MFG3219

at these points.

	Pressure#			Pressure # or Temperature*	
Test	Found	Left	Test	Found	Left
- 0	- 0	- 0	-	-	-
- 500	-	- 500	-	-	-
- 700	-	- 700	-	-	-
- 1000	-	- 1000	-	-	-
- 200	-	- 200	-	-	-
- 0	-	- 0	-	-	-

Remarks:_____

_____

_____

Signature _Bud Collins_