Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natu	ıral Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
811 S. First St., Artesia, NM 88210	<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210  OIL CONSERVATION DIVISION		30-025-23246 5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178	istrict III – (505) 334-6178 1220 South St. Francis Dr.		STATE FEE
000 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 SUNDRY NOTIC	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS.	ALS TO DRILL OR TO DEEPEN OR PL	UG BACK TO A	North Hobbs (G/SA) Unit
DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	ATION FOR PERMIT" (FORM C-101)	BBBCOCO	Section 28
	Gas Well Other	Aton	8. Well Number 142
2. Name of Operator	SI	EP 0 3 2014	9. OGRID Number: 157984
Occidental Permian Ltd.	· •		
3. Address of Operator	G:	RECEIVED	10. Pool name or Wildcat Hobbs (G/SA)
4. Well Location			
Unit Letter M: 731 feet from the South line and 731 feet from the West line			
Section 28	Township 18S		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3657' KB			
The state of the s			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK $oxtimes$	PLUG AND ABANDON 🔲	REMEDIAL WOR	K ☐ ALTERING CASING ☐
TEMPORARILY ABANDON			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	T JOB
DOWNHOLE COMMINGLE			
OTHER:		OTHER:	П
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.			
1) POOH w/ ESP equip			This to USO
2) Clare out to 4265 During this procedure we plan to use			
3) Acid treat with 2500 gallons per prog			
4) RIH with ESP equipment tank and haul contents to the required			
5) Return well to production disposal per ODC Rule 19.15.17			
		•	- -
		<u> </u>	
Spud Date:	Rig Release D	ate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Sta - 51	16 Course Lie Granialist	5	ATT 0/2/2014
SIGNATURE Store Monthle Lift Specialist DATE 9/2/2014			
Type or print name Steve Snead E-mail address steve snead@oxy.com PHONE:806-592-6312			
For State Use Only			
APPROVED BY: DATE 0/104/19			
Conditions of Approval (if any):			

SL. 0 5 2014