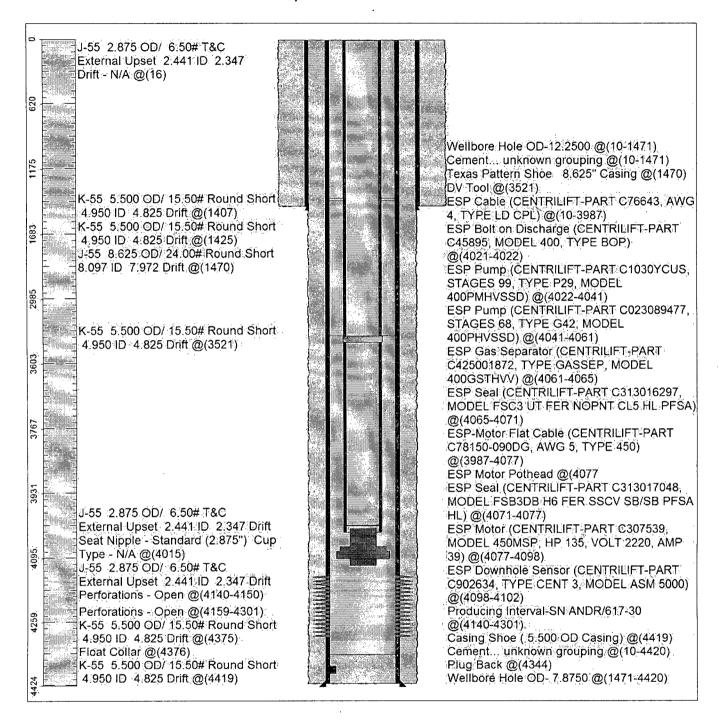
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVA	TION DIVISION		Revised 3-27-2004
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240		Francis Drobbs OCI	WELL API NO. 30-025-37102	~
<u>DISTRICT II</u>			5 Indicate Toma of Lance	
1301 W. Grand Ave, Artesia, NM 88210		OCT 0 6 20	STATE	FEE X
DISTRICT III			6. State Oil & Gas Lease No.	
1000 Rio Brazos Rd, Aztec, NM 87410	IGEG AND DEPORTS ON WELL	LS RECEIVE	7. Lease Name or Unit Agreer	nant Nama
	ICES AND REPORTS ON WELL	- · ·		nent Name
`	POSALS TO DRILL OR TO DEEPEN OI PLICATION FOR PERMIT" (Form C-101		North Hobbs (G/SA) Section 30	_
1. Type of Well:		,	8. Well No. 617	
Oil Well X	Gas Well Other			·
2. Name of Operator			9. OGRID No. 157984	
Occidental Permian Ltd.			10. Pool name or Wildcat	H-LL-(C/CA)
3. Address of Operator. HCR 1 Box 90 Denver City, TX 7	79323		10. Poor name of windcat	Hobbs (G/SA)
4. Well Location	7323			
Unit Letter D : 900	Feet From The North Li	ne and 863 Fee	et From The West	Line
			·	-
Section 30	Township 18-S 11. Elevation (Show whether DF, RKB,	Range 38-E	E NMPM	Lea County
	3658' GR	. Kr GK, etc.)		
Pit or Below-grade Tank Application	or Closure			
Pit Type Depth of Ground		rest fresh water well	Distance from nearest su	ırface water
	Below-Grade Tank: Volume			
The Emot Timothiess inn				
12. Check . NOTICE OF INTE	Appropriate Box to Indicate Natu NTION TO:		Other Data SEQUENT REPORT O	F:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERING	S CASING
	CHANGE PLANS	COMMENCE DRILLING OP	NS. PLUG & A	ABANDONMENT
		CASING TEST AND CEMEN		
		OTHER:		
OTHER:		JINEK		
4. RIH w/bit. Tag @4344'. POt5. RIH w/new ESP equipment se6. ND BOP/NU wellhead.	or Multiple Completions: Attach wel	lbore diagram of proposed of seal had no oit and cable	completion or recompletion.	starting any
RUPU 07/21/2014 RDPU 07/23/2014				
I hereby certify that the information above is truconstructed or	ie and complete to the best of my knowled	ige and belief. I further certify	that any pit or below-grade tank l	nas been/will be
closed according to NMOCD guidelines	, a general permit	or an (attached) alternative	e OCD-approved	
SIGNATURE MANAGE	that man	plan TITLE Administrative	Associate DATI	E 10/03/2014
TYPE OR PRINT NAME Mendy A. Joh	nnson E-mail address:	mendy johnson@oxy.com		· · · · · · · · · · · · · · · · · · ·
For State Use Only	2 man address.		1	000 002-0200
		Petroleum	Engineer	of alfill
APPROVED BY	ang	TITLE TOTOLOGIA	DA	10 10/10/17
CONDITIONS OF APPROVAL IF ANY:		•	4	

Work Plan Report for Well: NHSAU 617-30



Survey Viewer