Office	State of New Mexico	
District I		Revised July 18, 2013 WELL API NO.
		30-025-41550
		5. Indicate Type of Lease STATE X FEE
District IV - (505) 476-3460 Santa Fe, NM 8  1220 S. St. Francis Dr., Santa Fe, NM	7505	6. State Oil & Gas Lease No.
87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A.		7. Lease Name or Unit Agreement Name North Hobbs (GSA) Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PEGES OCD PROPOSALS.)		Section 18
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 946
2. Name of Operator Occidental Permian Ltd.	JAN 0 7 2015	9. OGRID Number 157984
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 4294 Houston, TX 77210	RECEIVED	Hobbs (GSA)
4. Well Location		
Unit Letter O : 1104 feet from the South line and 1670 feet from the East line  Section 18 Township 18S Range 38E NMPM Lea County		
11. Elevation (Show whether DF	<del></del>	
3661' GL		
12. Charl Ammanista Barata Indicata Natura (CNI dia Barata Od Da		
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.☐ P AND A ☐		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	OTHER.	
OTHER:  OTHER:  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.		
MI x RU pulling unit. ND WH x NU BOP. KIlled well x RU spooler x POOH ESP. Disassemble ESP x RD spooler.		
RIH w/ 6 1/8 bit x tag @ 4503'. POOH bit x 124 jts. tubing. RU spooler x RIH Schlumberger ESP x 125 jts. production tubing. RD spooler x ND BOP x NU WH. RD x MO location.		
production tubing. No spooler x No BOF X NO WH. NO X NO location.		
Spud Date: 12/12/14 (RUPU) Rig Release D	ate: 12/17/14	(RDPII)
12/12/14 (1010)	12/1//14	(Not o)
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE JOHN TITLE Regulatory Coordinator DATE 01/06/14		
Type or print name April Hood E-mail address: April_Hood@ oxy.com PHONE: 713-366-5771		
For State Use Only		
APPROVED BY: VALUE DOWN TITLE DUL DUPLINOC DATE 17/2015		
Conditions of Approval (if any):		

JAN 0 8 2015

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