Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-025-31428
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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		South Hobbs (G/SA) Unit
PROPOSALS.)  1. Type of Well: Oil Well ⊠ Gas Well □ Other Temporarily Abandons Och		8. Well Number 234
2. Name of Operator		9. OGRID Number: 157984
Occidental Permian Ltd.	141 0 0 2015	
3. Address of Operator	JAN 2 8 2015	10. Pool name or Wildcat Hobbs (G/SA)
2611 State Hwy 214 Denver	City, TX 79323	
4. Well Location	RECENED	
Unit LetterF_:24	80 feet from the North line and 1800	_feet from theWestline
Section 4	Township 19S Range 38E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3622' KB	
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 DRII	LLING OPNS.□ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMENT	rjob 🗌
DOWNHOLE COMMINGLE		
OTHER:	□ OTHER:	П
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
	rk). SEE RULE 19.15.7.14 NMAC. For Multiple Con	
	During this procedu	ro wo plan to uso
<ol> <li>Drill out plugs</li> <li>Clean out well to 4290'</li> </ol>		•
2. Clean out well to 4290' the closed-loop system with a steel tank and haul contents to the required		
4. Acid treat per prog		•
5. Scale squeeze	disposal per ODC Ri	ule 19.15.17
6. RIH w/ prod equipment		
Spud Date:	Rig Release Date:	
Spud Date.	Rig Release Date.	
I hereby certify that the information a	above is true and complete to the best of my knowledge	e and belief
Thereby certify that the information of	to the is that and complete to the obst of my knowledge	Jana Sener.
4		
SIGNATURE Some	TITLE_Lift SpecialistDA	TE1/26/2015
	•	
Type or print name Steve Snead E-mail address steve_snead@oxy.com PHONE: 806-592-6312_		
For State Use Only		,
ADDROVED BY:	TITLE Petroleum Engineer	DATE 02/02/15
APPROVED BY: Conditions of Approval (if appy):	my IIILE	DATE_02/04/7