Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resource	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-28360
District III – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa 1 C, 14141 07505	6. State Oil & Gas Lease No.
87505		
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	South Hobbs (G/SA) Unit
PROPOSALS.)		
1. Type of Well: Oil Well 🔀	Gas Well Other	8. Well Number
	0.00%	157
2. Name of Operator	MAR 0 6 2015	9. OGRID Number: 157984
Occidental Permian Ltd.		10. Pool name or Wildcat
3. Address of Operator 2611 State Hwy 214 Denver C	City, TX 79323	Hobbs (G/SA)
<u> </u>	ity, 1A 79323	11000S (G/SA)
4. Well Location		
Unit Letter D: 1245 feet from the North line and 1245 feet from the West line		
Section 10	Township 19S Range 38E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GF 3605' GR	R, etc.)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO		
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/CE	MENT 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.		
L L	•	this procedure we plan to USA
During this procedure we plan to use the closed-loop system with a steel		
1. Rot o and t ish rous		
		d haul contents to the required
3. RIH W/Beam eqmt disposal per ODC Rule 19.15.17		
4. RDPU and clean location		
		
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
\mathcal{L}		
SIGNATURE DATE 3/4/2015		
Type or print nameSteve Snead E-mail address: steve_snead@oxy.com_PHONE: 806-592-6312		
For State Use Only		
APPROVED BY: Mary Stown title Dist Supervisor Date 3/10/2015		
APPROVED BY: 1 CONTROL STORY TITLE DISL SUPERVICE DATE 3/10/2015		
Conditions of Approval (if any):		