

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

1220 South St. Francis Dr.
Santa Fe, NM 87500 **HOBBS OCD**

DISTRICT II
1301 W. Grand Ave, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

MAR 30 2015

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|---|
| WELL API NO. 30-025-05542 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 36 |
| 8. Well No. 211 |
| 9. OGRID No. 157984 |
| 10. Pool name or Wildcat Hobbs (G/SA) |

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|---|--|-----------------|
| <p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center">(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 proposals.)</p> | | RECEIVED |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned | | |
| 2. Name of Operator Occidental Permian Ltd. | | |
| 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 | | |
| 4. Well Location Unit Letter <u>C</u> : <u>330</u> Feet From The <u>North</u> <u>2310</u> Feet From The <u>West</u> Line Section <u>36</u> Township <u>18-S</u> Range <u>37-E</u> NMPM Lea County | | |
| 11. Elevation (Show whether DF, RKB, RT GR, etc.) 3670' GR | | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ | | |

| | |
|--|--|
| <p>E-PERMITTING <SWD INJECTION></p> <p>CONVERSION _____ RBDMS <input checked="" type="checkbox"/></p> <p>RETURN TO _____ TA <input checked="" type="checkbox"/></p> <p>CSNG _____ CHG LOC _____</p> <p>INT TO PA _____ P&A NR _____ P&A R _____</p> | <p>12. State Nature of Notice, Report, or Other Data</p> <p align="center">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <u>Casing Integrity Test/TA status request</u> <input checked="" type="checkbox"/></p> |
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This Approval of Temporary Abandonment Expires 3/17/2016

Date of test: 03/17/2015
Pressure readings: Initial - 520; 15 min - 515 PSI; 30 min - 510 PSI
Length of test: 30 minutes
Witnessed: NO

CIBP @3740'
Top perf @3838'

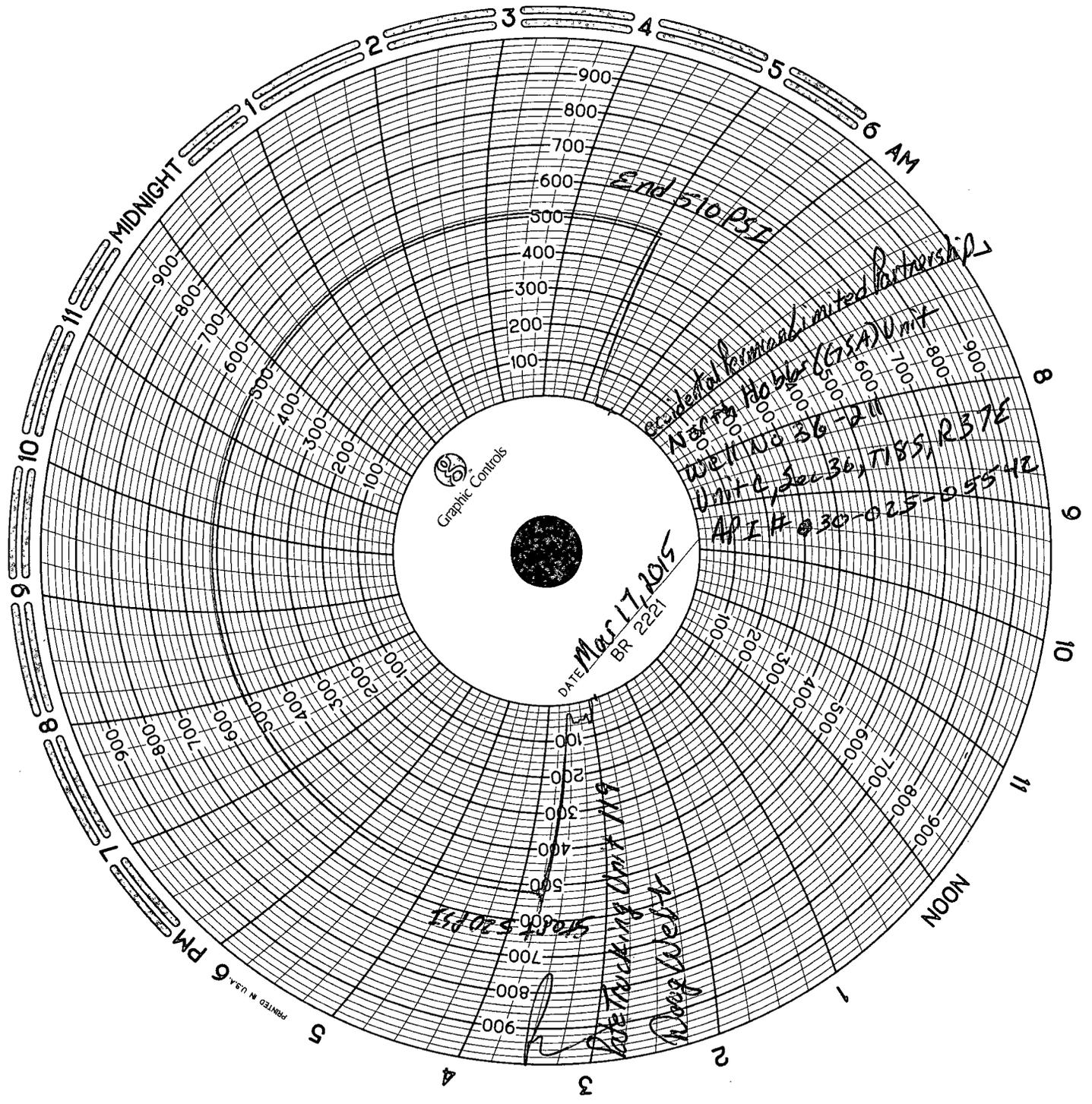
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Mendy A Johnson TITLE Administrative Associate DATE 03/25/2015
TYPE OR PRINT NAME Mendy A Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only
APPROVED BY Makesy Brown TITLE Dist. Supervisor DATE 3/30/2015
CONDITIONS OF APPROVAL IF ANY:

'APF 02 2015'

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