State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVATION DIVISI	ON
<u>DISTRICT I</u> 1625 N. French Dr. , Hobbs, NM 8824	Santa re, Inivi 6/303	WELL API NO. 30-025-28364
DISTRICT II 1301 W. Grand Ave, Artesia, NM 8821	HOBBS	5. Indicate Type of Lease STATE X FEE
DISTRICT III		
1000 Rio Brazos Rd, Aztec, NM 87410	JUN 17	2019 0. State on the Gas Bease No.
SUNDRY	NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FO DIFFERENT RESERVOIR. U	OR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO SE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	VED South Hobbs (G/SA) Unit
Type of Well: Oil Well	Gas Well Other Temporarily Abandoned	8. Well No. 161
Name of Operator Occidental Permian Ltd.		9. OGRID No. 157984
3. Address of Operator		10. Pool name or Wildcat Hobbs (G/SA)
HCR 1 Box 90 Denver City	y, TX 79323	
4. Well Location Unit Letter G : 263	Feet From The North Line and 1331	Feet From The East Line
Section 9	Township 19-S Range	38-E NMPM Lea County
	11. Elevation (Show whether DF, RKB, RT GR, etc.) 3594' GL	
Pit Liner Thickness m	Nicata Natura of Notice Page	tion Material
E-PERMITTING <swd_< td=""><td>INJECTION></td><td>SUBSEQUENT REPORT OF:</td></swd_<>	INJECTION>	SUBSEQUENT REPORT OF:
CONVERSION	RBDM\$	
RETURN TO	TA PM. REMEDIAL WORK	ALTERING CASING
CSNG	CHG LOC COMMENCE DRILLI	<u> </u>
INT TO PA P&A NR	P&A R CASING TEST AND	
	OTHER: Casing	integrity test/TA status request X
	ed Operations (Clearly state all pertinent details, and give pertine 103. For Multiple Completions: Attach wellbore diagram of pro-	
Date of test: 06/03/2015	This Approval of Temporary	12/2011
Pressure readings: Initial – 540 F	PSI; Ending - 525 Pandonment Expires 6	3/2010
Length of test: 30 minutes	HINAL IM	EXTENSION
Witnessed: NO		
CIBP @3985; Top Perf @4034'		
	ve is true and complete to the best of my knowledge and belief. I further	r certify that any pit or below-grade tank has been/will be
constructed or closed according to NMOCD guide	lines , a general permit or an (attached) all	ornation OCD annual Control
7000	d plan	ernative OCD-approved
SIGNATURE		trative Associate DATE 06/15/2015
	A. Olmson E-mail address: mendy johnson@o	<u>TELEPHONE NO.</u> 806-592-6280
For State Use Only	MR12 2	- S 00 its 1/2/2011
APPROVED BY	MOWN THE DUST	Juphwww DATE 6/17/2015
CONDITIONS OF APPROVAL IF AN	Y).	· · · · · · · · · · · · · · · · · · ·

JUN 1 9 2015



