

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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| SUNDRY NOTICES AND REPORTS ON WELLS (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.) | | WELL API NO. 30-025-42469 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: Injector | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Occidental Permian Ltd. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 | | 7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit |
| 4. Well Location Unit Letter <u>P</u> : <u>837</u> feet from the <u>South</u> line and <u>1277</u> feet from the <u>East</u> line Section <u>18</u> Township <u>18S</u> Range <u>38E</u> NMPM Lea County | | 8. Well Number: 18-953 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3677.3' (KB) | | 9. OGRID Number: 157984 |
| | | 10. Pool name or Wildcat Hobbs (G/SA) |

HOBBS OGD
 AUG 10 2015
 RECEIVED

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

| | | | |
|--|--|--|--|
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> | | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> | |
| OTHER: Initial Completion <input checked="" type="checkbox"/> | | OTHER: <input type="checkbox"/> | |

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.

- Drillout DV tool to Float Collar at 4718'
- Log well
- Selectively perforate and acid treat interval 4372' to 4640'
- RIH with injection equipment
- Turn well to injection
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-
-
-

During this procedure we plan to use the closed-loop system with a steel tank and haul contents to the required disposal per ODC Rule 19.15.17

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE TITLE Injection Well Analyst DATE 8-6-15

Type or print name Robbie Underhill E-mail address Robert_Underhill@oxy.com PHONE: 806-592-6287

For State Use Only

APPROVED BY: TITLE Petroleum Engineer DATE 08/10/15

Conditions of Approval (if any):

AUG 11 2015