Submit 1 Copy To Appropriate District Office	State of Ivew Ivi		Form C-103
District I - (575) 393-6161	ict 1 – (575) 393-6161 Energy, Minerals and Natural Resources		Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 8824 <u>District II</u> – (575) 748-1283		DIVISION	30-025-05469
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fa, NIM 87505			STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa 1 c, 14141 o	7505	6. State Oil & Gas Lease No.
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 10 PROPOSALS.)			7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other Injector	3100	8. Well Number 211
2. Name of Operator	j das wen 🗀 omer mjector	OCT 2 9 2013	9. OGRID Number: 157984
Occidental Permian Ltd.	/		
Address of Operator HCR 1 Box 90 Denver City, T.	X 79323	RECEIVED	10. Pool name or Wildcat Hobbs (G/SA)
4. Well Location	17323		
Unit Letter C: 330 feet from the North line and 2310 feet from the West line			
Section 23 Township 18S Range 37E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3689' (KB)			
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 DRILLING OPNS. P AND A			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
DOWNHOLE COMMINGLE			
OTHER: Return to Inject	tion	OTHER:	
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.			
1) MIRU PU – Pressure test csg			
2) Clean out well to TD			
3) Deepen to 4500'			procedure we plan to use
4) Acidize OH W/ 6000 gallons 15% PAD + 3000 gals Guidon			OOD System with
5) Kiti with hij. DitA			UI COntents to the
6) Run H-5 7) Return well to injection disposal per ODC Rule 19.15.17			
Spud Date:	Rig Release D	ate:	
Spau Date.	Rig Release D	atc.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
O_{1}/I			
SIGNATURE TITLE Injection Well Analyst DATE 10-19-15			
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 11/04/15 Conditions of Approval (17 any):			