

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505



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

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

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.
30-025-12783 ✓

5. Indicate Type of Lease
STATE FEE

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 such proposals.)

7. Lease Name or Unit Agreement Name
North Hobbs (G/SA) Unit
Section 23 ✓

1. Type of Well: Oil Well Gas Well Other Injector

8. Well No. 411 ✓

2. Name of Operator
Occidental Permian Ltd. ✓

9. OGRID No. 157984

3. Address of Operator
HCR I Box 90 Denver City, TX 79323

10. Pool name or Wildcat Hobbs (G/SA)

4. Well Location
Unit Letter A : 330 Feet From The North 330 Feet From The East Line
Section 23 Township 18-S Range 37-E NMPM LEA County

11. Elevation (Show whether DF, RKB, RTGR, etc.)
3686' DF

Pit or Below-grade Tank Application or Closure
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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <u>High Casing Pressure</u> <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- RUPU&RU.
- ND wellhead/NU BOP.
- Determine failure and repair.
- RBIH with injection packer and equipment
- ND BOP/NU wellhead.
- Test casing to 600 PSI for 30 minutes and chart for the NMOCD.
- RDPU & RU. Clean location and return well to injection

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

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 [Signature] TITLE Injection Well Analyst DATE 02/10/16
TYPE OR PRINT NAME Robbie Underhill E-mail address: Robert_Underhill@oxy.com TELEPHONE NO. 806-592-6287

For State Use Only
APPROVED BY [Signature] TITLE Petroleum Engineer DATE 02/12/16

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