

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

HOBBS OCD
 JAN 29 2016
 RECEIVED

WELL API NO. 30-025-36281	✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> Federal Well	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 30	✓
8. Well Number 538	✓
9. OGRID Number: 157984	
10. Pool name or Wildcat Hobbs (G/SA)	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3651' GL	

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Occidental Permian Ltd. ✓

3. Address of Operator
2611 State Hwy 214 Denver City, TX 79323

4. Well Location
 Unit Letter J: 1983 feet from the South line and 1856 feet from the East line
 Section 30 Township 18S Range 38E NMPM Lea County ✓

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- RUPU and POOH W/ESP equipment
- CO and Treat if necessary
- RIH W/ESP eqmt
- RDPU and clean location
-

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 Steve Snead TITLE Lift Specialist DATE 1/26/2016

Type or print name Steve Snead E-mail address: steve_snead@oxy.com PHONE: 806-592-6312
 For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 02/18/16
 Conditions of Approval (if any):

FEB 19 2016

cy