

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 July 18, 2013

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

WELL API NO. 30-025-28335	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. N/A	
7. Lease Name or Unit Agreement Name South Hobbs (G/SA)	<input checked="" type="checkbox"/>
8. Well Number 131	<input checked="" type="checkbox"/>
9. OGRID Number 157984	<input checked="" type="checkbox"/>
10. Pool name or Wildcat Hobbs (G/SA)	

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
P.O. Box 4294, Houston, TX 77210

4. Well Location
Unit Letter G : 1383 feet from the North line and 2498 feet from the East line
Section 4 Township 19S Range 38E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3617.3' (GL)

HOBBS OCD

MAY 03 2016

RECEIVED

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

E-PERMITTING <input type="checkbox"/> <SWD CONVERSION <input type="checkbox"/> RETURN TO <input type="checkbox"/> CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> INT TO PA <input type="checkbox"/> P&A NR <input type="checkbox"/> P&A R <input type="checkbox"/>	INJECTION <input type="checkbox"/> RBDMS <input checked="" type="checkbox"/> MB TA <input checked="" type="checkbox"/> LR OTHER: TA <input checked="" type="checkbox"/>
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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.

(3/28/16) MIRU, killed well, ND WH, NU BOP. POOH w/ 126 jts and ESP equipment. RIH w/ CIBP and set @ 4012, mix and dumped 4 sxs cmt on CIBP. Pumped 20 BBLs 10# brine and tested csg to 600 psi, which held. RIH w/ setting tool and tag TOC @3971'. Circ hole w/ 95 BBLs 10#pk fluid, and tested to 600 psi which held. POOH w/ 131 jts 2 3/8 tbg. ND BOP, NU WH, ran MIT for NMOCD, RD pulling unit and equipment. Cleaned location and MO location.

This Approval of Temporary Abandonment Expires 3/29/2021 ✓

This well has been TA'd

Spud Date: 3/28/2016 Rig Release Date: 3/29/2016

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

SIGNATURE Sarah Mitchell TITLE Regulatory Specialist DATE 5/2/16

Type or print name Sarah Mitchell E-mail address: sarah_mitchell@oxy.com PHONE: 713-366-5469

For State Use Only
 APPROVED BY: Malay Brown TITLE Dist. Supervisor DATE 5/3/2016
 Conditions of Approval (if any):

