

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

Form C-103  
 Revised August 1, 2011

HOBBS OGD  
 MAY 24 2016  
 RECEIVED

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Injector <input type="checkbox"/> 2. Name of Operator Occidental Permian Ltd. 3. Address of Operator HCR 1 Box 90 Denver City, TX 79323 4. Well Location Unit Letter <u>  O  </u> : <u>  330  </u> feet from the <u>  South  </u> line and <u>  2310  </u> feet from the <u>  East  </u> line Section <u>  24  </u> Township <u>  18S  </u> Range <u>  37E  </u> NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3655' (GL)	WELL API NO. 30-025-05490 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit 8. Well Number 24-341 9. OGRID Number: 157984 10. Pool name or Wildcat Hobbs (G/SA)
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input checked="" 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"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> 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: <input type="checkbox"/>
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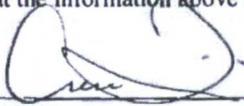
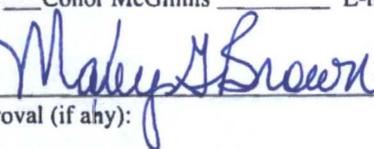
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 1) MIRU PU
- 2) POOH with ESP
- 3) PB with Pea gravel & set CIBP
- 4) Squeeze well via balanced plug method per prog
- 5) Dig out squeeze and pressure test
- 6) Deepen wellbore to 4500'
- 7) RU Renegade and run CNL/GR/CCL log
- 8) Perf 4191-4304' (gross interval)
- 9) Acidize all pay & OH
- 10) Scale squeeze well
- 11) RIH with ESP
- 12) Return well to production

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 Production Engineer DATE 5/24/2016  
 Type or print name Conor McGinnis E-mail address: conor.mcginis@oxy.com PHONE: 713-825-0902  
 For State Use Only  
 APPROVED BY:  TITLE Dist Supervisor DATE 5/24/2016  
 Conditions of Approval (if any):