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 July 18, 2013

WELL API NO.
30-025-07594

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.)

1. Type of Well: Oil Well ☐   Gas Well ☐   Other   Temporarily Abandoned

2. Name of Operator
Occidental Permian, Ltd

3. Address of Operator
HCR 1 Box 90   Denver City, TX 79323

4. Well Location

Unit Letter   N   :   660   feet from the   South   line and   1980   feet from the   West   line

Section   3   Township   19-S   Range   38-E   NMPM   Lea   County

7. Lease Name or Unit Agreement Name

South Hobbs (G/SA) Unit

8. Well Number   58

9. OGRID Number   157984

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

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3607' RDB

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐   PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐   CHANGE PLANS ☐
PULL OR ALTER CASING ☐   MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: TA status extension request ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐   P AND A ☐
CASING/CEMENT JOB ☐

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.

Run MI test to gain extension on temporary abandoned status.

**Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart**

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   *Mendy A Johnson*   TITLE   Admin. Associate   DATE   10/04/2016

Type or print name   Mendy A. Johnson   E-mail address: mendy_johnson@oxy.com   PHONE: 806-592-6280

For State Use Only

APPROVED BY: *Maley S Brown*   TITLE   Dist. Supervisor   DATE   10/13/2016

Conditions of Approval (if any):

NO PRODUCTION REPORTED IN
267 MONTHS