Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
811 S. First St., Artesia, NM 88210AUG 2	State of New Mexico State	Revised August 1, 2011 WELL API NO. 30-025-27214 5. Indicate Type of Lease
District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe.	1220 South St. Flancis Dr.	STATE FEE 6. State Oil & Gas Lease No.
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOS.	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 20
1. Type of Well: Oil Well Gas Well Other: TA Injector		8. Well Number: 233
Name of Operator Occidental Permian Ltd.		9. OGRID Number: 157984
3. Address of Operator HCR 1 Box 90 Denver City, TX 793	323	10. Pool name or Wildcat Hobbs (G/SA)
4. Well Location		
Unit LetterK_:16	destruire de la constitución de	feet from theWestline
Section 20	Township 18S Range 38E	
	11. Elevation (Show whether DR, RKB, RT, GR, etc. 3648' GL	
	3070 05	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INT	PLUG AND ABANDON REMEDIAL WOR CHANGE PLANS COMMENCE DR	RILLING OPNS. P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEMEN	IT JOB
OTHER: Return to Water Injection		
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.		
 MIRU Pulling Unit to return TA injector to service. RIH with bit to CIBP @ 4175' and drillout. Continue with bit to PBTD @ 4476' and cleanout. Run GR log to locate Zone I and add additional perforations in Zone IA and Zone IB (geologist to identify depths from log). Acid treat existing and new perforations 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		
5. Acid treat existing and new perforations. 6. RIH with injection equipment.		
7. Perform MIT		
 RDMO PU Turn well to active status for wat 	er injection.	
10.		
Spud Date:	Rig Release Date:	
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 That The TITLE Production Engineer DATE 8/17/17		
Type or print nameRick Reeves E-mail address rick reeves@oxy.com PHONE: 713-215-7653		
APPROVED BY: VALUE SOUNTILE ACIT DATE 8/21/2017		
Conditions of Approval (if any):		/ /