Submit I Come To Approximate District		
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		30-025-07631 -
811 S. First St. Artesia MM 38210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III - 553 34-6178	1220 South St. Francis Dr.	STATE D FEE 🗡
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 4761760	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS NORM FOR PROPOSALS	TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		South Hobbs (G/SA) Unit
1. Type of Well: Oil Well Gas Well Other Injector		8. Well Number 27
2. Name of Operator		9. OGRID Number 157984
Occidental Permian, Ltd		
3. Address of Operator		10. Pool name or Wildcat
HCR 1 Box 90 Denver City, T	TX 79323	Hobbs (G/SA)
4. Well Location		
Unit Letter E : 1	980 feet from the North line and	660feet from theline
Section 5	Township 19-S Range 38-E	NMPM Lea County
11	. Elevation (Show whether DR, RKB, RT, GR, etc.	
3629' DF		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL COMMENCE DRILLING OPNS. P AND A DOWNHOLE COMMINGLE MULTIPLE COMPL CASING/CEMENT JOB CASING/CEMENT JOB 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. Date of test: 07/31/2017 Pressure readings: Initial - 580 PSI Ending - 550 PSI Length of test: 32 minutes Witnessed: Yes - Kerry Fortner - NMOCD Witnessed: Yes - Kerry Fortner - NMOCD		
Spud Date:	Rig Release Date:	
		11.12.0
I hereby certify that the information above	ve is true and complete to the best of my knowledge	ge and belief.
$\gamma \gamma$	hP	
SIGNATURE NEALLY	TITLE Admin. Associate	DATE 08/24/2017
Type or print name Mendy A. Johns	E-mail address: mendy_johnso	on@oxy.comPHONE:806-592-6280
For State Use Only		M 11
APPROVED BY: Story Off	I'V TITI FOMOLIANS MA	Cen DATE 8/31/17
Conditions of Approval (if any):		

