Submit 1 Copy To Appropriate District		F 0.100
Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION DIVISION	30-025-25127
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Dio Brazos De Mateo MM 87410	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV – (\$2) 56-3460 1220 S. St. Francis Dr., Santa Fe WM 87505		0. State Off & Gas Lease No.
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name of Olint Agreement Name
DIFFERENT RESERVOR TSE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		South Hobbs (G/SA) Unit
1. Type of Well. Oil Well Gas Well Other TA'd Injector		8. Well Number 112
2. Name of Operator Occidental Permian, Ltd		9. OGRID Number 157984
3. Address of Operator		10. Pool name or Wildcat
HCR 1 Box 90 Denver C	ity, TX 79323	Hobbs (G/SA)
4. Well Location		· · · · · · · · · · · · · · · · · · ·
Unit Letter M :		710feet from theline
Section 3	Township 19-S Range 38-E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3612' DF	
	3012 DI	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	PLUG AND ABANDON REMEDIAL WORI	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A		
PULL OR ALTER CASING		
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM		
OTHER: OTHER: Casing integrity test/TA status request X 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: 08/17/2017		
Pressure readings: Initial - 610 PSI Ending - 600 PSI		
Length of test: 32 minutes		
Witnessed: YES - Kerry Fortner - NMOCD		
Saud Data	Rio Polosso Dotor	
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 LADY COMPANY TITLE Admin. Associate DATE 09/21/2017		
Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280		
For State Use Only		
APPROVED BY: Kerry For	men TITLE Compliance Of	ficer DATE 9-28-17
Conditions of Approval (if any):		

