

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

Form C-103
Revised August 1, 2011

HOBBS OGD
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
JUN 07 2018

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|--|--|---|
| SUNDRY 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.) | | WELL API NO. 30-025-28308 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injector <input checked="" type="checkbox"/> | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Occidental Permian Ltd. | | 6. State Oil & Gas Lease No. N/A |
| 3. Address of Operator P.O. Box 4294, Houston, Tx 77210 | | 7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit |
| 4. Well Location (Surface) Unit Letter <u>L</u> : <u>1980</u> feet from the <u>South</u> line and <u>646</u> feet from the <u>West</u> line Section <u>34</u> Township <u>18S</u> Range <u>38E</u> NMPM Lea County | | 8. Well Number COOP 5 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3650' (GL) | | 9. OGRID Number: 157984 |
| | | 10. Pool name or Wildcat: Hobbs (G/SA) |

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

| | | | |
|---|---|--|--|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| OTHER: <input checked="" type="checkbox"/> Conformance. Plug back bottom of well. | | OTHER: <input type="checkbox"/> | |

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. ND Wellhead. NU BOP.
- 2) POOH w/ 2-7/8" duoline tubing
- 3) Trip a bit and cleanout well to PBTD
- 4) Dump bail cement from 4490' to 4450'
- 5) Cap cement with CIBP
- 6) RIH with injection packer and SA 4078'
- 7) Circulate packer fluid on tubing-casing annular space
- 8) Perform MIT
- 9) ND BOP. NU Wellhead.
- 10) RDMO PU. Put well onto injection

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

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 Jacob S. Cox TITLE Production Engineer DATE 06/07/2018

Type or print name Jacob S. Cox E-mail address: Jacob_Cox@oxy.com PHONE: 713-497-2053

For State Use Only
APPROVED BY: Mary E Brown TITLE AO/II DATE 6/7/2018
Conditions of Approval (if any):