Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u> (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-025-29444	
811 S. First St., Artesia, NM 88210	811 S. First St. Artesia NM 88210 UIL CUNSERVAI LUBERT VISION		5. Indicate Type of Lease
1220 South 11 1 1200 Point Pd Aste NM 97410		STATE FEE X	
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87	FIVED	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLAN BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)			South Hobbs (G/SA) Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned			8. Well Number 197
Name of Operator Occidental Permian, Ltd			9. OGRID Number 157984
3. Address of Operator			10. Pool name or Wildcat
HCR 1 Box 90 Denver City, TX 79323			Hobbs (G/SA)
4. Well Location			
Unit Letter L: 2030 feet from the South line and 860 feet from the West line			
Section 34		nge 38-E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3625' GL			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON			
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			
CLOSED-LOOP SYSTEM OTHER: TA status extension reque		OTHER:	П
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			
prior of running with rest of chart			
Spud Date:	Rig Release Da	te:	:
<u> </u>		,	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Mand Company			
SIGNATURE DATE 06/22/2018			
Type or print name Mensy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280			
For State Use Quly A			
W aby ME and WITT / b-box			
APPROVED BY: DATE OF STATE OF			