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, NHOBBS OCD District II - (575) 748-1283		WELL API NO. 30-025-07546		
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease		
District III – (505) 334-6178 JUL 2 5 2018 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505		STATE FEE		
District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, RECEIVED 87505		6. State Oil & Gas Lease No.		
SUNDRY NOTICE	7. Lease Name or Unit Agreement Name			
(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		North Hobbs (G/SA) Unit		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Temporarily Abandoned		8. Well Number 331		
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 City, TX 79323		Hobbs (G/SA)		
4. Well Location	920 feet from the South line and 1	1780 feet from the East line		
	Township 18-S Range 38-E 1. Elevation (Show whether DR, RKB, RT, GR, etc.)			
	3644' GR			
TEMPORARILY ABANDON C PULL OR ALTER CASING M DOWNHOLE COMMINGLE C CLOSED-LOOP SYSTEM OTHER: TA status extension request 13. Describe proposed or completed of starting any proposed work). proposed completion or recompleted of starting any proposed work).	LUG AND ABANDON REMEDIAL WORL HANGE PLANS COMMENCE DRI RULTIPLE COMPL CASING/CEMENT INCLTIPLE COMPL OTHER: INCLTIPLE COMPL OTHER:	ILLING OPNS. P AND A T JOB		
Condition of Approval: notify				
OCD Hobbs office 24 hours				
prior of running MIT Test & Chart				
		Will lest & 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 DUCK OF MAN TITLE Admin. Associate DATE 07/23/2018				
Type or print name Mency A. Johns	on E-mail address: mendy_johnso	on@oxy.com PHONE: 806-592-6280		

APPROVED BY: Maley Strown TLE_	AO/I	DATE 7/26/2018
Conditions of Approval (if any):	ľ	

151 MONTH'S