

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 CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

JUL 02 2018

|   |
|---|
| WELL API NO.<br>30-025-28348  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>N/A   |
| 7. Lease Name or Unit Agreement Name<br>South Hobbs (G/SA) Unit                                     |
| 8. Well Number 145  |
| 9. OGRID Number: 157984   |
| 10. Pool name or Wildcat:<br>Hobbs (G/SA)   |

**RECEIVED**

**SUNDRY NOTICES AND 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.)

1. Type of Well: Oil Well  Gas Well  Other Active Injector

2. Name of Operator  
Occidental Permian Ltd.

3. Address of Operator  
P.O. Box 4294, Houston, Tx 77210

4. Well Location (Surface)  
 Unit Letter N : 577 feet from the South line and 1984 feet from the West line  
 Section 3 Township 19S Range 38E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3606' (GL)

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

|  |   |  |  |
|--|---|--|--|
| <b>NOTICE OF INTENTION TO:</b>                               |   | <b>SUBSEQUENT REPORT OF:</b>                     |  |
| 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"/> PB 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.

- MIRU PU. ND Wellhead. NU BOP.
- POOH with injection equipment
- Cleanout well to current TD
- PB bottom with cement/CIBP to improve injection conformance
- RIH with injection equipment
- ND BOP. NU Wellhead. RDMO PU. Return well to 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 07/02/2018

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

APPROVED BY: Maley Brown TITLE AO/I DATE 7/2/2018

Conditions of Approval (if any)

ME