Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
Office  District I – (575) 393-6161  1625 N. French Dr., Hobbs, NM 88440  District II – (575) 748-1283  811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1000 Rio Brazos Rd., Aztec, NM 87410  State of New Mexico  State of		Revised August 1, 2011 WELL API NO.
		30-025-29893
		5. Indicate Type of Lease STATE FEE -
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM <b>RECEIVED</b> 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. N/A
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		7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well	Other	8. Well Number 222
2. Name of Operator Occidental Permian Ltd.		9. OGRID Number: 157984
3. Address of Operator P.O. Box 4294, Houston, Tx 77210		10. Pool name or Wildcat: Hobbs (G/SA)
4. Well Location (Surface)		
Unit Letter L: 2019 feet from the North line and 817 feet from the West line		
Section 34 Township 18S Range 38E NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3643.6' (KB)		
JOHN (ND)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐   REMEDIAL WORK ☐ ALTERING CASING ☐ TEMPORARILY ABANDON ☒ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
OTHER:	OTHER:	
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.		
<ul><li>2) POOH with ESP</li><li>3) Set CIBP at +/-4000' and cap with 35' ceme</li></ul>	ent	
<ul><li>3) Set CIBP at +/-4000' and cap with 35' ceme</li><li>4) Tag TOC</li></ul>	Duri	ng this procedure we plan to use
5) Circulate well with corrosion inhibited packer fluid the closed-loop system with a steel		closed-loop system with a steel
6) Run MIT tank		and haul contents to the required
7) ND BOP. NU Wellhead. RDMO PU	disp	osal per ODC Rule 19.15.17
Condition of Approval: notify		
OCD Hobbs office 24 hour	rs	
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 TITLE Production Engineer DATE 08/22/2018		
Type or print name Jacob S. Cox E-mail address: Jacob Cox@oxy.com PHONE: 713-497-2053		
For State Use Grily		
APPROVED BY: Value Solowy TITLE AV I DATE 8/22 2018		
Conditions of Approval (if any):	TITLE NO L	DATE O/22 JOSE



