

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

HOBBS OCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

NOV 26 2018

RECEIVED

WELL API NO. 30-025-05584
5. Indicate Type of Lease STATE [X] FEE []
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name East Eumont Unit
8. Well Number: 27
9. OGRID Number: 157984
10. Pool name or Wildcat Eumont Yates SVN RVR QN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3695' (KD)

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 [X] Gas Well [] Other: -----
2. Name of Operator Oxy USA WTP
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323
4. Well Location Unit Letter B : 660 feet from the North line and 1980 feet from the East line
Section 9 Township 19S Range 37E NMPM Lea County

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK [] PLUG AND ABANDON []
TEMPORARILY ABANDON [X] CHANGE PLANS []
PULL OR ALTER CASING [] MULTIPLE COMPL []
DOWNHOLE COMMINGLE []

SUBSEQUENT REPORT OF:

- REMEDIAL WORK [] ALTERING CASING []
COMMENCE DRILLING OPNS [] P AND A []
CASING/CEMENT JOB []

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.
2. POOH with pump, rods and tubing.
3. RIH with WL and set CIBP at 3740' and cap with cement
4. Circulate inhibited fluid
5. Cap well and perform MIT
6. RDMO

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

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

prior of running MIT Test & Chart

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Production Engineer DATE 11/26/2018

Type or print name Jake Perry E-mail address: Jake.Perry@oxy.com PHONE: 713-215-7546

For State Use Only

APPROVED BY: [Signature] TITLE AO/I DATE 11/26/2018
Conditions of Approval (if any):