

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 July 18, 2013

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

WELL API NO. 30-025-28359	—
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	—
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name South Hobbs G/SA Unit	—
8. Well Number 156	—
9. OGRID Number 157984	—
10. Pool name or Wildcat Hobbs; Grayburg - San Andres	—
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3617' KB	

HOBBS OCD
 RECEIVED
 DEC 2 2018

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 Injector

2. Name of Operator
Occidental Permian LTD

3. Address of Operator
PO Box 4294 Houston, TX 77210

4. Well Location
 Unit Letter H : 1370 feet from the N line and 330 feet from the E line
 Section 9 Township 19S Range 38E NMPM County Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Convert to Injection <input checked="" 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.

05/30/18 MIRU x NDWH x NUBOP. 05/31/18 POOH 123 jts tbg x ESP. RIH 4 3/4" bit x tagged @ 4270'. Drilled to 4324' x circ well clean. 06/01/18 Ran CIL from 4316' to surface. RIH RBP @ 4010 x ran CBL. 06/02/18 POOH RBP x perf'd 4276' 4312'. 06/04/18 Ran acid job w/ 6280 gals of 15%HCL x flushed w/ 50 bbls FW. 06/13/18 RIH 5 1/2" RBP @ 982' x dumped sand for WH change.

07/30/18 MIRU x NDWH x NUBOP. Wash off sand and POOH RBP. RIH on/off tool x 123 jts 2 7/8" tbg @ 3972' x set pkr @ 4136'. 07/31/18 Ran MIT - Chart attached. RD x NDBOP x NUWH. ***Well I currently on injection***

Spud Date: 05/30/18 Rig Release Date: 07/31/18

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

SIGNATURE *April Hood* TITLE Regulatory Specialist DATE 11/30/2018

Type or print name April Hood E-mail address: April_Hood@Oxy.com PHONE: 713-366-5771

For State Use Only

APPROVED BY *[Signature]* TITLE Compliance Supervisor DATE 12/19/18
 Conditions of Approval (if any):

