

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 88203  
 District III - (505) 334-6172  
 1000 Rio Brazos Rd., Artesia, NM 88203  
 District IV - (505) 434-0660  
 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

HOBBS OED  
 APR 29 2019  
 RECEIVED

WELL API NO. <b>30-025-05450</b>
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 <b>North Hobbs (G/SA Unit)</b>
8. Well Number <b>341</b>
9. OGRID Number <b>157984</b>
10. Pool name or Wildcat <b>Hobbs (G/SA)</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3688' DF</b>

**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 Temporarily Abandoned

2. Name of Operator  
Occidental Permian, Ltd

3. Address of Operator  
2611 State Hwy 214 Denver City, TX 79323

4. Well Location  
 Unit Letter O : 660 feet from the South line and 160 feet from the East line  
 Section 14 Township 18-S Range 37-E NMPM Lea County

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Casing integrity test/TA status extension request <input checked="" type="checkbox"/>	
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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.

Date of test: 04/15/2019  
 Pressure readings: Initial - 560 PSI Ending - 565 PSI  
 Length of test: 32 minutes  
 Witnessed: Yes - Gary Robinson - NMOCD

This Approval of TA EXPIRES: 11-7-19  
**FINAL TA STATUS EXTENSION -**  
 Well needs to be **PLUGGED** or **RETURNED** to **PRODUCTION**  
 BY THE DATE STATED ABOVE: K7

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 Mendy A. Johnson TITLE Administrative Associate DATE 04/26/2019

Type or print name Mendy A. Johnson E-mail address: mendy\_johnson@oxy.com PHONE: 806-592-6280

APPROVED BY: Kerry Foster TITLE Compliance Officer A DATE 5-7-19  
 Conditions of Approval (if any):