

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

HOBBBS OCD  
MAY 22 2019  
RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-05504
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Occidental Permian LTD		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 4294 Houston, TX 77210		7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
4. Well Location Unit Letter H : 2310 feet from the N line and 330 feet from the E line Section 25 Township 18S Range 37E NMPM County Lea		8. Well Number 421
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3660' GL		9. OGRID Number 157984
		10. Pool name or Wildcat Hobbs; (G/SA)

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: <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.

9/29/18: MIRU x NDWH x NUBOP. 10/1/18: POOH 117 jts 2 7/8" tbg x esp equipment. RIH 3 7/8" bit x tagged TD @4372'. RIH 4 1/2" pkr x rbp @4108'. 10/2/18: Ran acid job w/ 800 gals 15% acid. Moved pkr to 4170' x pumped 1100 gals 15% acid. 10/3/18: POOH pkr x rbp. RIH 4 1/2" CIBP @4155'. 10/4/18: RIH 4 1/2" CICR @4060'. Pumped 150 sxs thixotropic cmt x squeezed perfs to 2500 psi. Stung out CICR x circulated cmt out w/ 140 bbls FW. 10/5/18 - 10/9/18: Drilled cmt through CICR x CIBP to 4156'. RIH x tagged TD @4372'. 10/10/18: RIH esp @ 3731' x 2 7/8" tbg @ 3683'. RD x NDBOP x NUWH.

Spud Date:

09/29/2018

Rig Release Date:

10/10/2018

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

SIGNATURE

TITLE Regulatory Specialist

DATE 05/02/2019

Type or print name April Hood

E-mail address: April\_Hood@Oxy.com

PHONE: 713-366-5771

For State Use Only

APPROVED BY:

TITLE

Petroleum Engineer

DATE

05/22/19

Conditions of Approval (if any):