

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

Form C-103  
 Revised July 18, 2013

**HOBBS OCD**  
**MAY 22 2019**  
**RECEIVED**

|   |
|---|
| WELL API NO.<br>30-025-23481  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>North Hobbs G/SA Unit                                       |
| 8. Well Number 242  |
| 9. OGRID Number<br>157984   |
| 10. Pool name or Wildcat<br>Hobbs; (G/SA)   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3642' KB                                      |

**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

2. Name of Operator  
Occidental Permian LTD

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

4. Well Location  
 Unit Letter N : 420 feet from the S line and 1980 feet from the E line  
 Section 19 Township 18S Range 38E NMPM County Lea

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

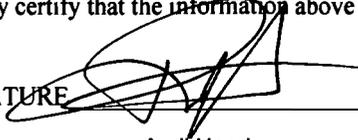
|  |   |   |  |
|--|---|---|--|
| <b>NOTICE OF INTENTION TO:</b>                 |   | <b>SUBSEQUENT REPORT OF:</b>                      |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/> | ALTERING CASING <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.

3/20/19: MIRU x NDWH x NUBOP. POOH 126 jts 2 7/8" tbg x esp. RIH 4 3/4" bit x tagged @4335'. RIH 5 1/2" cibr @4100' x RIH 5 1/2" cibr @3975'. 3/22/19: Pumped 20bbbls of cmt, stung in retainer x pumped 8 more bbbls cmt getting 18 bbbls cmt into formation, stung out cibr. 3/25/19 - 328/19: Drilled on cibr @3975' x through cmt to pbtd @4350'. 3/29/19: Shot perfs 4158' - 4272'. Performed 6 setting ppi job w/ 3000 gals IC200 HCL acid. 4/1/19: RIH 126 jts 2 7/8" tbg @4036' x esp @4076'. RD x NDBOP x NUWH.

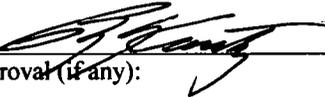
Spud Date: 3/20/19 Rig Release Date: 4/1/19

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

SIGNATURE  TITLE Regulatory Specialist DATE 05/09/2019

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):