

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

HOBBS OCD  
 DEC 02 2019  
 RECEIVED

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-07605
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. 19552
3. Address of Operator PO Box 4294 Houston, TX 77210		7. Lease Name or Unit Agreement Name South Hobbs G/SA Unit
4. Well Location Unit Letter <u>D</u> : <u>660</u> feet from the <u>N</u> line and <u>660</u> feet from the <u>W</u> line Section <u>4</u> Township <u>19S</u> Range <u>38E</u> NMPM County <u>Lea</u>		8. Well Number <u>16</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3626' RDB		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

<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 checked="" 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: <input 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.

10/4/19: MIRU x NDWH x NUBOP. 10/7/19: POOH 112 jts 2 7/8" tbg x esp equipment. 10/8/19: RIH 4 1/8" bit x tagged td @4299'. RIH 5" rbp @4075' x pkr @3990'. Pressure tested csg to 600 psi x would loose 300 psi in 2 min. Reset rbp @3960' x pkr @3930' x pressure tested tools to 1000 psi, held. Pressure tested csg to 600 psi x lost 300 psi in 2 min. POOH 5" rbp x pkr. RIH 6 5/8" pkr @3190' x pressure tested liner top to 600 psi, held. Pressure tested csg to 600 psi x leaked. Reset pkr @3070' x pressure tested squeezed holes x liner top to 600 psi, held. Pressure tested from 3070' to surface x leaked. Reset pkr @1820' x pressure tested from 1820' to surface to 600 psi, and held. 10/9/19: Isolated csg leak in 6 5/8" csg from 3038' to 3070' x pressure tested to 600 psi x lost 350 psi in 2 minutes. RIH 5" cibr @4075' x 5" cibr @3990'. 10/10/19: Pumped 100 sxs thixotropic cmt followed by 50 sxs class c cmt x squeezed zone 1 leak to 2500 psi. Pumped 12 bbls of thoxotropic cmt into formation x reversed out cmt w/ 130 bbls FW. 10/11/19 - 10/2/19: RIH x tagged cibr @3990'. Drilled on cibr from 3990' through cmt to td @4298'. RIH 5" rbp @4075' x 5" pkr @4010' x pressure tested squeezed perfs to 1000 psi for 30 min, held. 10/14/19: RIH 112 jts 2 7/8" tbg @3658' x esp @3770' x 10 jts 2 3/8" tbg @4061. RD x NDBOP x NUWH.

Spud Date: 10/4/19 Rig Release Date: 10/14/19

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

SIGNATURE April Santos TITLE Regulatory Specialist DATE 11/26/2019

Type or print name April Santos E-mail address: April\_Hood@Oxy.com PHONE: 713-366-5771

**For State Use Only**

APPROVED BY: Kerry Fort TITLE CO A DATE 12-20-19  
 Conditions of Approval (if any):