

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

District II  
811 S 1st Street, Artesia, NM 88210  
Phone: (575) 748-1283 - Fax: (575) 748-9720

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office  
**BRADENHEAD TEST REPORT**

|                                         |                            |
|-----------------------------------------|----------------------------|
| Operator Name<br>OCCIDENTAL PERMIAN LTD | API Number<br>30-025-28981 |
| Property Name<br>SOUTH HOBBS G/SA UNIT  | Well No.<br>186            |

**Surface Location**

|         |              |                 |              |  |                   |               |                  |               |               |
|---------|--------------|-----------------|--------------|--|-------------------|---------------|------------------|---------------|---------------|
| UL -Lot | Section<br>4 | Township<br>19S | Range<br>38E |  | Feet From<br>2420 | N/S Line<br>N | Feet From<br>213 | E/W Line<br>W | County<br>LEA |
|---------|--------------|-----------------|--------------|--|-------------------|---------------|------------------|---------------|---------------|

**Well Status**

|                                                      |                                                    |                     |                                                                                        |                  |
|------------------------------------------------------|----------------------------------------------------|---------------------|----------------------------------------------------------------------------------------|------------------|
| TA'D Well<br>Yes <input checked="" type="radio"/> No | SHUT-IN<br>Yes <input checked="" type="radio"/> No | INJECTOR<br>INJ SWD | PRODUCING<br><input checked="" type="radio"/> OIL <input checked="" type="radio"/> GAS | DATE<br>07-26-21 |
|------------------------------------------------------|----------------------------------------------------|---------------------|----------------------------------------------------------------------------------------|------------------|

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

**OBSERVED DATA**

If bradenhead flowed water, check all of the descriptions that apply:

|                      | (A) Surface                            | (B) Interm(1) | (C) Interm(2) | (D) Prod Csng                          | (E) Tubing                                                                                                                      |
|----------------------|----------------------------------------|---------------|---------------|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| Pressure             | 0 #                                    | NA            | NA            | 339 #                                  | 425 #                                                                                                                           |
| Flow Characteristics |                                        |               |               |                                        | CO <sub>2</sub> _____<br>WTR _____<br>GAS _____<br>Type of Fluid _____<br>Injected for _____<br>Water Flood if _____<br>applies |
| Puff                 | Y / <input checked="" type="radio"/> N | Y / N         | Y / N         | Y / <input checked="" type="radio"/> N |                                                                                                                                 |
| Steady Flow          | Y / <input checked="" type="radio"/> N | Y / N         | Y / N         | <input checked="" type="radio"/> Y / N |                                                                                                                                 |
| Surges               | Y / <input checked="" type="radio"/> N | Y / N         | Y / N         | Y / <input checked="" type="radio"/> N |                                                                                                                                 |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | Y / <input checked="" type="radio"/> N |                                                                                                                                 |
| Gas or Oil           | Y / <input checked="" type="radio"/> N | Y / N         | Y / N         | Y / <input checked="" type="radio"/> N |                                                                                                                                 |
| Water                | Y / <input checked="" type="radio"/> N | Y / N         | Y / N         | Y / <input checked="" type="radio"/> N |                                                                                                                                 |

Remarks - Please state for each string (A,V,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Robert Aranda 432-209-7116

|                                                                                                |                           |
|------------------------------------------------------------------------------------------------|---------------------------|
| Signature:  | OIL CONSERVATION DIVISION |
| Printed name: JUSTIN SAXON                                                                     | Entered into RBDMS        |
| Title: SURVEILLANCE LEAD                                                                       | Re-test                   |
| E-mail Address: JUSTIN_SAXON@OXY.COM                                                           |                           |
| Date:                                                                                          |                           |
| Phone: 806-215-3671                                                                            |                           |
| Witness:                                                                                       |                           |

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Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS  
  
Action 52730

CONDITIONS

|                                                                               |                |
|-------------------------------------------------------------------------------|----------------|
| Operator:<br>OCCIDENTAL PERMIAN LTD<br>P.O. Box 4294<br>Houston, TX 772104294 | OGRID:         |
|                                                                               | 157984         |
|                                                                               | Action Number: |
|                                                                               | 52730          |
| Action Type:                                                                  |                |
| [UF-BHT] Bradenhead Test (BRADENHEAD TEST)                                    |                |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| gcordero   | None      | 6/3/2022       |