

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

WELL API NO. <b>30-025-28309</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>19552</b>
7. Lease Name or Unit Agreement Name <b>South Hobbs G/SA Unit</b>
8. Well Number <b>Coop 6</b>
9. OGRID Number <b>157984</b>
10. Pool name or Wildcat <b>Hobbs; Grayburg - San Andres</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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector <input type="checkbox"/>	
2. Name of Operator <b>Occidental Permian LTD.</b>	
3. Address of Operator <b>P.O. BOX 4294, HOUSTON, TX 77210</b>	
4. Well Location Unit Letter <b>E</b> : <b>1950</b> feet from the <b>N</b> line and <b>535</b> feet from the <b>W</b> line Section <b>34</b> Township <b>19S</b> Range <b>38E</b> NMPM County <b>LEA</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3605' GL</b>	

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.

9/30/21: Mipu, mi equipment, rupu, ru equipment, tbq had 900psi, csg had 0psi, l&t csg to 500psi which lost 75psi in 10 mins, pumped 50bbbs down tbq, well went on vacuum, ndwh, nubop, and ru workfloor. Released inj pkr, pooh w/119jts of 2-7/8 tbq, 11jts of 2-3/8 tbq, 4" inj pkr, rih w/4" redressed AS1-X inj pkr, perf sub, test pkr, 11jts of 2-3/8, 119jts of 2-7/8, set inj pkr @4245', unjayed off of pkr, set test pkr@4213', tested down to inj pkr which held 600psi, tested from test pkr up to surf which leaked 75psi in 10 mins, secured well in, and shut down.

10/02/21: POOH w/ tub and RIH w/ duoline. latch Pkr and space out. ran good chart. pump out plug and RD unit and equipment.

Spud Date:

9/30/21

Rig Release Date:

10/02/21

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

SIGNATURE Roni Mathew TITLE Regulatory Analyst Sr. DATE 1/31/2022

Type or print name Roni Mathew E-mail address: roni\_mathew@oxy.com PHONE: 713-215-7827  
**For State Use Only**

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 9/12/22  
 Conditions of Approval

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

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

**BRADENHEAD TEST REPORT**

Operator Name <i>Occidental Petroleum</i>		API Number <i>30-025-28309</i>	
Property Name <i>SHOU COOP</i>		Well No. <i>#COOP 6</i>	

**1. Surface Location**

UL - Lot	Section <i>34</i>	Township <i>18S</i>	Range <i>38E</i>	Feet from	N/S Line	Feet From	E/W Line	County <i>Lea</i>
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**Well Status**

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	OIL	PRODUCER	GAS	DATE <i>10-2-21</i>
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**OBSERVED DATA**

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure				<i>0</i>	<i>0</i>
<u>Flow Characteristics</u>					
Puff	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	WTR <input type="checkbox"/>
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y / N	Y / N	Y / N	<input checked="" type="radio"/> Y / N	Type of Fluid Injected for Waterflood if applies
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,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

*PWO  
MIT/BHT*

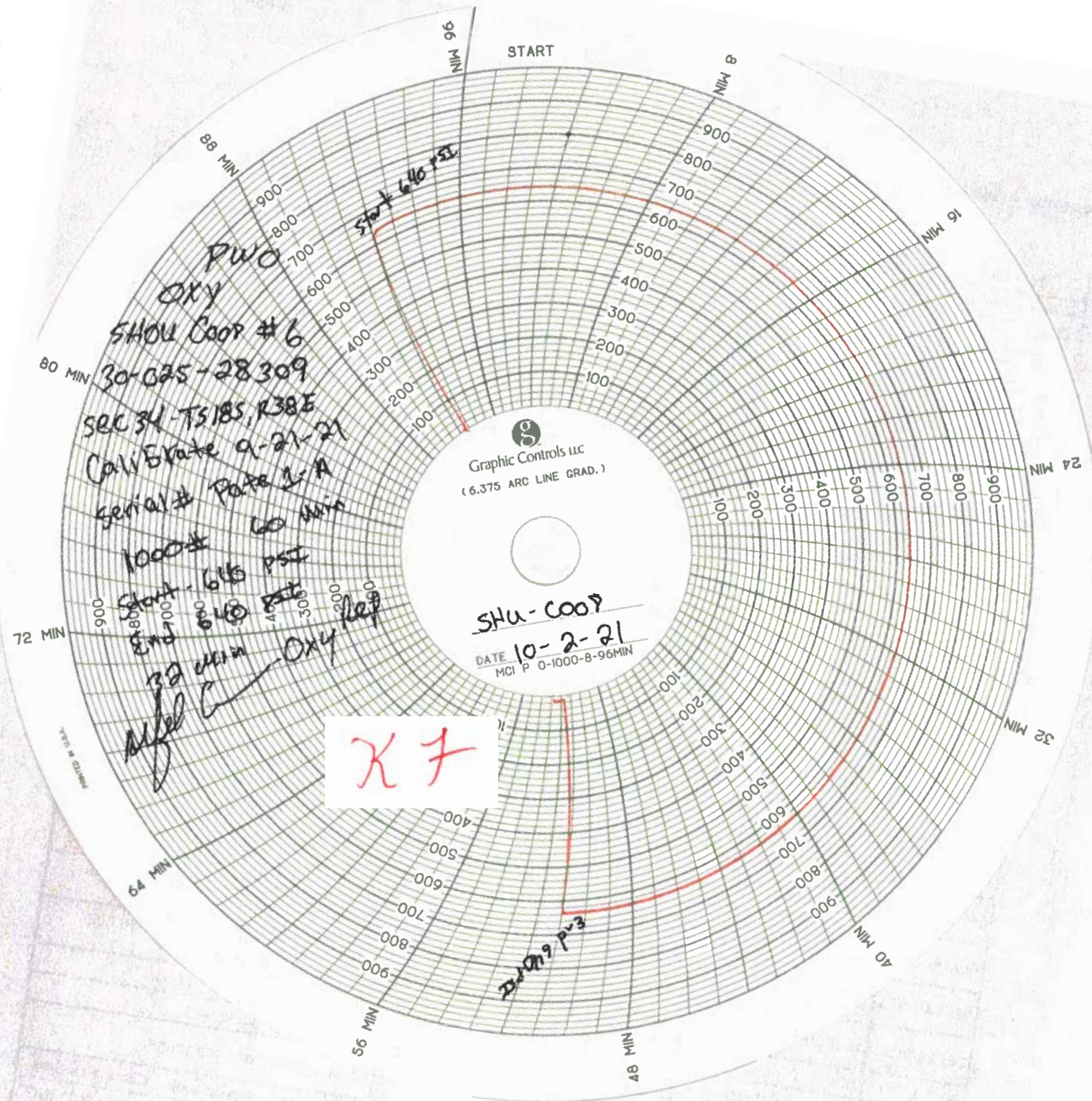
Alfredo Cenicerros - *Oxy Rep*

*Reflex* *806-215-238*

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:		<i>K 7</i>	
Date:	Phone:		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM





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**State of New Mexico**  
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**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS  
  
Action 79984

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 79984
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	9/12/2022