

JUN 12 2015

RECEIVED

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>30-025-28970 |
| Property Name<br>SOUTH HOBBS (G/SA) UNIT | Well No.<br>COOP 11        |

7. Surface Location

|               |               |                 |              |                   |                   |                   |                  |               |
|---------------|---------------|-----------------|--------------|-------------------|-------------------|-------------------|------------------|---------------|
| UL - Lot<br>K | Section<br>34 | Township<br>18S | Range<br>38E | Feet from<br>2500 | N/S Line<br>SOUTH | Feet From<br>1660 | E/W Line<br>WEST | County<br>LEA |
|---------------|---------------|-----------------|--------------|-------------------|-------------------|-------------------|------------------|---------------|

Well Status

|                  |    |                |    |     |                 |     |                 |                 |
|------------------|----|----------------|----|-----|-----------------|-----|-----------------|-----------------|
| TA'D WELL<br>YES | NO | SHUT-IN<br>YES | NO | INJ | INJECTOR<br>SWD | OIL | PRODUCER<br>GAS | DATE<br>4-17-15 |
|------------------|----|----------------|----|-----|-----------------|-----|-----------------|-----------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                               |
|----------------------|------------|--------------|--------------|-------------|---|
| Pressure             | Ø          | NA           | NA           | Ø           | 1065                                    |
| Flow Characteristics |            |              |              |             |   |
| Puff                 | Y/N        | Y/N          | Y/N          | Y/N         | CO2 ___                                 |
| Steady Flow          | Y/N        | Y/N          | Y/N          | Y/N         | WTR <input checked="" type="checkbox"/> |
| Surges               | Y/N        | Y/N          | Y/N          | Y/N         | GAS ___                                 |
| Down to nothing      | Y/N        | Y/N          | Y/N          | Y/N         | Type of Fluid                           |
| Gas or Oil           | Y/N        | Y/N          | Y/N          | Y/N         | Injected for                            |
| Water                | Y/N        | Y/N          | Y/N          | Y/N         | Waterflood if                           |
|                      |            |              |              |             | applies                                 |

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

BS 6/12/15

John Albert 575-631-6881

|                                       |                           |
|---------------------------------------|---------------------------|
| Signature: <i>Mendy Johnson</i>       | OIL CONSERVATION DIVISION |
| Printed name: MENDY JOHNSON           | Entered into RBDMS        |
| Title: ADMINISTRATIVE ASSOCIATE       | Re-test                   |
| E-mail Address: mendy_johnson@oxy.com |                           |
| Date: 6/11/15                         | Phone: 806-592-6280       |
|                                       | Witness:                  |

INSTRUCTIONS ON BACK OF THIS FORM

JUN 16 2015

**American Valve & Meter, Inc.**

1113 W. BROADWAY  
 P.O. BOX 166  
 HOBBS, NM 88240

TO: Gate Tank  
 DATE: 05-08-75

This is to certify that:

I, Bill Collins, Technician for American Valve & Meter, Inc., has checked the calibration of the following instrument.

8" Pressure Recorder Serial No: 7842

at these points.

Pressure 0-1000 # Temperature \_\_\_\_\_

| Test | Found | Test | Found | Test | Found |
|------|-------|------|-------|------|-------|
| 1    | 5     | 1    | 0     | 1    | 1     |
| 500  | B     | 500  | 500   | 1    | 1     |
| 700  | M     | 700  | 700   | 1    | 1     |
| 1000 | E     | 1000 | 1000  | 1    | 1     |
| 200  |       | 200  | 200   | 1    | 1     |
| 1    |       | 1    | 0     | 1    | 1     |

Remarks: \_\_\_\_\_

Signature Bill Collins