

HOBBS OCD

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-27-2004

FILE IN TRIPLICATE

OIL CONSERVATION DIVISION

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

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

DISTRICT II
1301 W. Grand Ave., Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO. 30-025-28882	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit Section 28	
8. Well No.	232
9. OGRID No.	157984
10. Pool name or Wildcat	Hobbs (G/SA)

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 checked="" type="checkbox"/> Other <input type="checkbox"/> Injector	
2. Name of Operator Occidental Permian Ltd.	
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	
4. Well Location Unit Letter <u>K</u> : <u>2300</u> Feet From The <u>South</u> <u>1350</u> Feet From The <u>West</u> Line Section <u>28</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County <u>✓</u>	
11. Elevation (Show whether DF, RKB, RT GR, etc.) 3646' GL	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth of Ground Water _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	Multiple Completion <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____	<input type="checkbox"/>	OTHER: <u>Casing integrity test</u>	<input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Date of test: 05/23/2016

Pressure readings: Initial – 540 PSI Ending – 540 PSI

Length of test: 30 minutes

Witnessed: YES – Kristel Heady w/NMOCD

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 06/08/2016
TYPE OR PRINT NAME Mendy A. Johnson E-mail address: mendy_johnson@oxy.com TELEPHONE NO. 806-592-6280

For State Use Only
APPROVED BY Mary Brown TITLE Dist. Supervisor DATE 6/13/2016
CONDITIONS OF APPROVAL IF ANY: _____

HOBBS OCD

JUN 13 2016

RECEIVED



Graphic Controls

DATE 5-23-16 BR 2221

BR 2221

NOON

44

10

6

Q

7

AM

5

4

3

2

213

MIDNIGHT

10

9

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7.

6 PMW

PRINTED IN U.S.A.

5

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3

2

1

2

540
Stem

[illegible]

Handwritten notes on a green grid background, including the words "Good Morning", "Good Afternoon", "Good Evening", and "Good Night".

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

BRADENHEAD TEST REPORT

Operator Name OCCIDENTAL PERMIAN, LTD	API Number 30-025-28882
Property Name NORTH SOUTH HOBBS (G/SA) UNIT	Well No. 232

2. Surface Location

UL - Lot K	Section 28	Township 18S	Range 38E	Feet from 2300	N/S Line South	Feet From 1350	E/W Line West	County LEA
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR YES	SWD	PRODUCER OIL	GAS	DATE 6/2/16
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	N/A	N/A	0	1052
Flow Characteristics					
Puff	Y / 0	Y / N	Y / N	Y / N	CO2 — WTR ✓ GAS —
Steady Flow	Y / 0	Y / N	Y / N	Y / 0	Type of Fluid
Surges	Y / 0	Y / N	Y / N	Y / 0	Injected for
Down to nothing	Y / N	Y / N	Y / N	Y / N	Waterflood if
Gas or Oil	Y / 0	Y / N	Y / N	Y / N	applies.
Water	Y / 0	Y / N	Y / N	Y / N	

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

D) puff to zero in less than 3 sec.

Donald Higgins 575-631-7886

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@oxv.com	
Date: 6/8/2016	Phone: 806-592-6280
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM