

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) 334-678
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 746-3460
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

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.)		WELL API NO. 30-025-37266
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned		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.
3. Address of Operator 2611 State Hwy 214 Denver City, TX 79323		7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
4. Well Location Unit Letter F : 1660 feet from the North line and 2106 feet from the West line Section 4 Township 19-S Range 38-E NMPM Lea County		8. Well Number 243
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3616' GR		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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: Casing integrity test/TA status extension request ☒

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.

Date of test: 01/29/2019
Pressure readings: Initial - 580 PSI Ending - 580 PSI
Length of test: 32 minutes
Witnessed: Yes - George Bowers - NMOCD

This Approval of Temporary
Abandonment Expires 1/29/2021

Spud Date:

Rig Release Date:

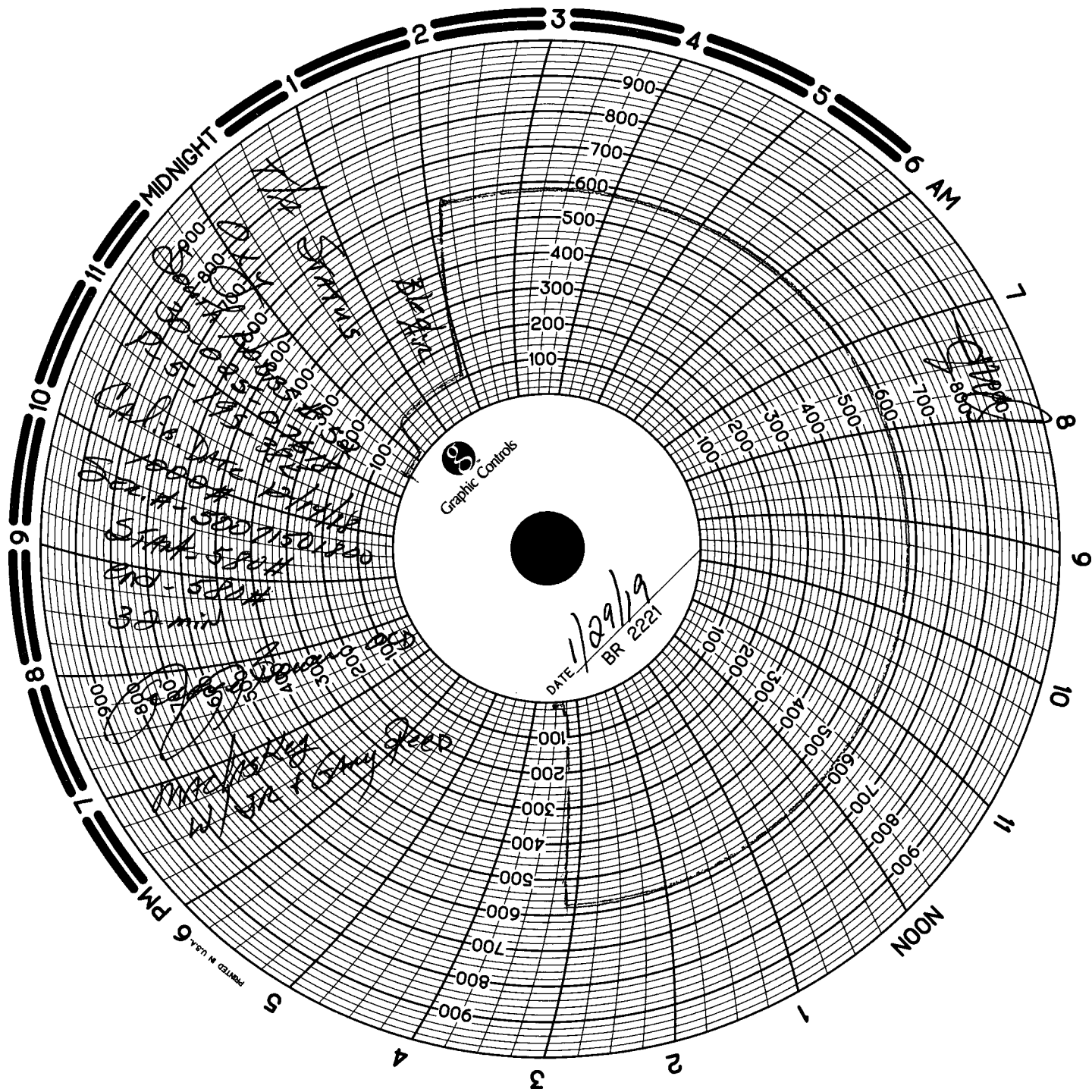
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 01/31/2019

Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280

For State Use Only

APPROVED BY: George Bowers TITLE Compliance Supervisor DATE 2/4/2019
Conditions of Approval (if any):



Occidental Permian Ltd.

South Hobbs G/SA Unit

Lea. County

Well No. 243

API: 30-025-37266

Footage Location: 1660' FNL & 2106' FWL

Section: 4, T:19-S, R:38-E, U.L. "F"

Current Status: TA

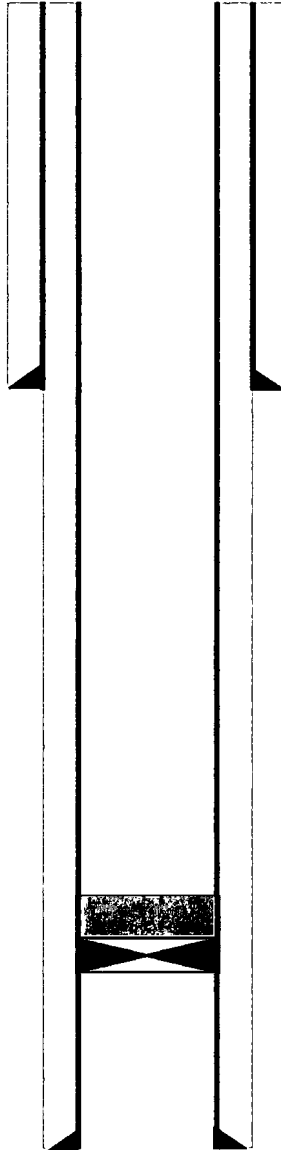
8-5/8" (24#) @ 1508'
Cemented w/ 750 sx
TOC: surf. (circulated)

CIBP SA 4025' & Capped w/ 35' cement
TOC at 3990'

5 1/2" (15.5#) @ 4368'
Cemented w/ 950 sxs
TOC: Surface (Circ.)

PBTD: 3990'
Total Depth: 4368'

Perf Interval: 4104'-4262'
No sqz'd perf's



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

BRADENHEAD TEST REPORT

Operator Name <i>Ony</i>	API Number <i>30-025-07618</i>
Property Name <i>SOUTH HOBBS UNIT</i>	Well No. <i>#052</i>

2. Surface Location

UL - Lot <i>P</i>	Section <i>S</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>330</i>	N/S Line <i>S</i>	Feet from <i>330</i>	E/W Line <i>E</i>	County <i>LEA</i>
----------------------	---------------------	------------------------	---------------------	-------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJ <input type="checkbox"/>	INJECTOR <input type="checkbox"/>	SWD <input type="checkbox"/>	OIL <input checked="" type="checkbox"/>	PRODUCER <input type="checkbox"/>	GAS <input type="checkbox"/>	DATE <i>1/29/2019</i>
--	--	---------------------------------	--------------------------------------	---------------------------------	--	--------------------------------------	---------------------------------	--------------------------

OBSERVED DATA

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

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

Signature: <i>Mendy Johnson</i> <i>1/31/19</i>	OIL CONSERVATION DIVISION
Printed name: <i>MENDY JOHNSON</i>	Entered into RBDMS
Title: <i>ADMIN ASSOC.</i>	Re-test
E-mail Address: <i>MENDY_JOHNSON@ONY.COM</i>	
Date: <i>1/29/19</i>	
Phone: <i>320</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM