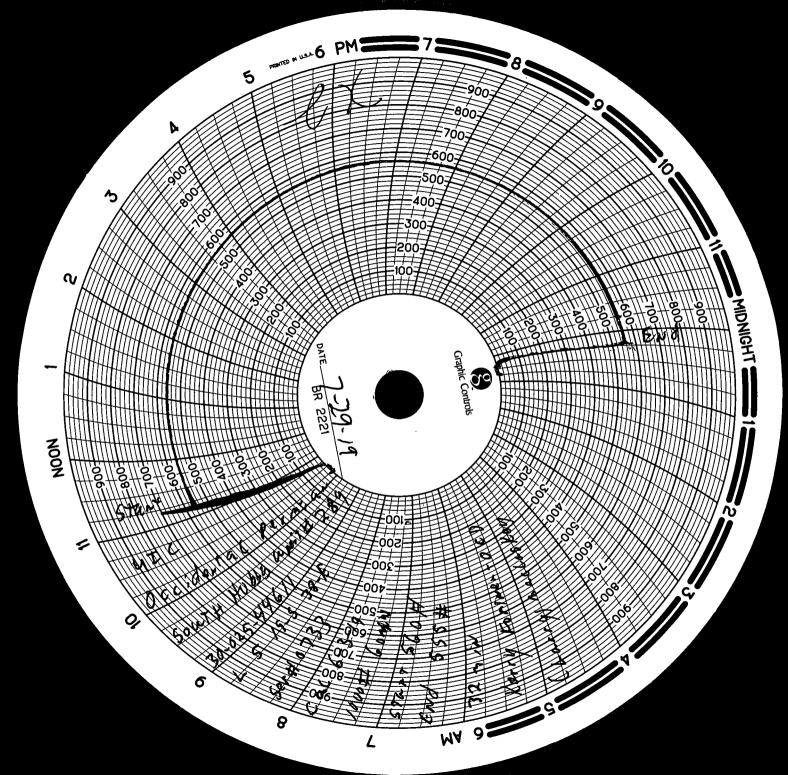
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103			
District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013			
1625 N. French Dr., Hobbs, NM \$8340 <u>District II</u> – (575) \$48-1283		WELL API NO. 30-25-44611			
811 S. First St.,	OIL CONSERVATION DIVISION	5. Indicate Type of Lease			
District III – (0.) 334-617 1000 Rio Branch, NM 87430	1220 South St. Francis Dr.	STATÉ ☐ FEE 🗵			
District IV — 805) 476-460 1220 S. St. Francis Dr., Santa M 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.			
	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name			
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	South Hobbs (G/SA) Unit				
1. Type of Well: Oil Well	Gas Well Other Injector	8. Well Number 289			
Name of Operator Occidental Permian, Ltd	9. OGRID Number 157984				
3. Address of Operator	10. Pool name or Wildcat				
1017 West Stanolind Roa	Hobbs (G/SA)				
4. Well Location	0004	1400			
Unit LetterL	2281 feet from the South line and	1130 feet from the WEST line			
Section 5	Township 19-S Range 38-S	NMPM Lea County			
	11. Elevation (Show whether DR, RKB, RT, GR, et 3625.4' KB	(c.)			
NOTICE OF II PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or com of starting any proposed v proposed completion or re	PLUG AND ABANDON REMEDIAL WO CHANGE PLANS COMMENCE D MULTIPLE COMPL CASING/CEME OTHER: Cas pleted operations. (Clearly state all pertinent details, a work). SEE RULE 19.15.7.14 NMAC. For Multiple Completion.	BSEQUENT REPORT OF: ORK			
Length of test: 32 mi Witnessed: Yes - Ga	ry Robinson - NMOCD				
Spud Date:	Rig Release Date:				
I handhy contify that the information	a should be true and complete to the heat of my knowle	doe and halief			
Thereby certify that the information	n above is true and complete to the best of my knowled	uge and benef.			
//47	8 –	add to			
SIGNATURE /	TITLE Well Surveillance Lea	DATE 08/06/19			
Type or print nameJustin Saxo	E-mail address: _Justin_Saxo	n@oxy.com PHONE: 575-397-8206			
For State Use Only					
APPROVED BY: Conditions of Approval (if any):	Int TITLE Compliance	Office A DATE 8-8-19			



<u>District I</u> 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 OCCIDENTAL PERMIAN, LTD						30-025-44611					
Property Name SOUTH HOBBS (G/SA) UNIT									Well No. 289		
					. Surface Locati	ion					
UL - Lot L	Section 5	Township 19S	Range 38E		Feet from		Line UTH		From 30	E/W Line WEST	County
		.,,,		<u> </u>	Well Status						<u> </u>
Wall	Status	Ī	SHUT-IN		PRODUCING			DATI	1		
	Status		N		INT		フ	-29			
	OPE	N BRADENI	EAD AND INT	ERMEDIAT	TE TO ATMOSPHE	ERE INDIV	VIDUALL	Y FOR 1	5 MINUT	ES EACH	
e handauhand	. Camadana	ion abaala all	of the description		DBSERVED DA	TA					
<u> </u>	nowed wa		rf-Interm		(1)-Interm(2)	(C)Inter	rm-Prod		(D)Pro	d Csng	(E)Tubing
Pressure									1-7		
Flow Charac	teristics			-		-	_		+	<u> </u>	1474
Puff		<u></u>	7 N	Y/ Y			Y / N		Y / 🕅		-
Steady F	low	<u>ا</u> ا	Y / 6		Y / N	Y/N			Y/03		-
Surges			Y/0		Y/N		Y/N		1	Y / 🚫	-
Down to nothing			y / N		Y / N	Y / N			(A) V	1	
Gas or Oil			Y / 8		Y/N	Y/N				Y / (Ŋ)]
Water	Water		Y/0N		Y/N	Y/N				Y/(5)	
f bradenhead	l flowed wa	ter, check all	of the description	ns that apply	y:						
CLEAR FRESH					SALTY SULFUR			•	BLACK		
		. <u> </u>					1				
Remarks: UI (larry Ser#	c To y) M o73		.Key			2.1	ECTING			WTR,	GAS,CO2
Cal		s-19 									
Signature:									L CON		N DIVISION
Signature:	:: MENDY	JOHNSON	те								N DIVISION
Signature:	:: MENDY	JOHNSON VE ASSOCIA						Entered			N DIVISION
Signature: Printed name: Title: ADMI	:: MENDY	JOHNSON VE ASSOCIA		92-6280				Entered			N DIVISION