State of New Mexico Energy, Minerals and Natural Resources Department

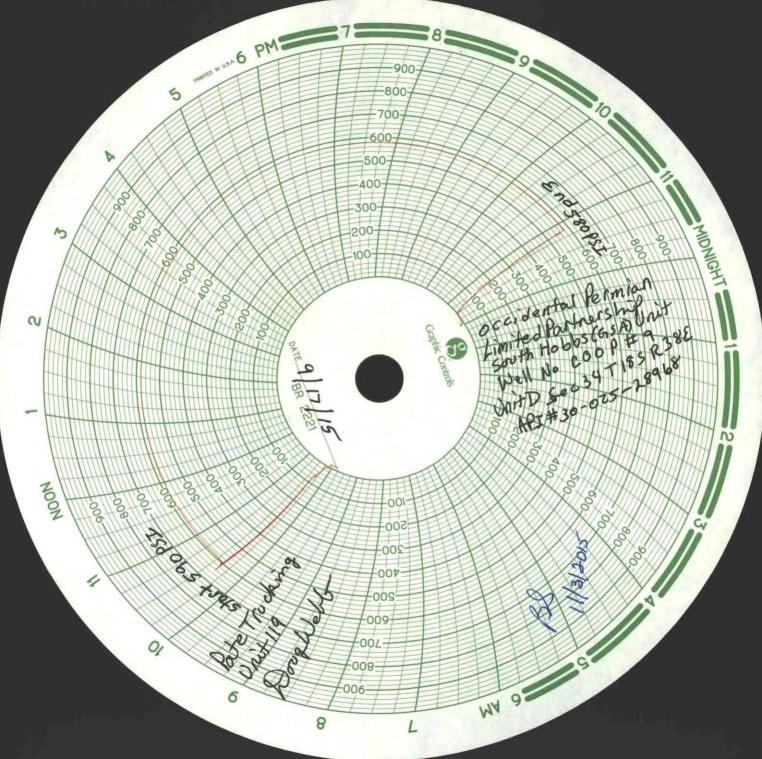
Form C-103

Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVAT	ION DIVISION					
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr.		WELL API NO. 30-025-28968				
DISTRICT II	Sunta i e, i in	HOBBS OCD	5. Indicate Type of Lease				
1301 W. Grand Ave, Artesia, NM 88210			STATE	FEE X			
DISTRICT III		NOV 0 3 2015	6. State Oil & Gas Lease No.				
1000 Rio Brazos Rd, Aztec, NM 87410		NUT					
	OTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreem	ent Name			
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC RECEIVED DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (Form C-101) for such proposals.)			South Hobbs (G/SA) Unit				
1. Type of Well:		8. Well No. COOP 9					
Oil Well	Gas Well Other Injecto	r		1			
2. Name of Operator	1		9. OGRID No. 157984				
Occidental Permian Ltd. 3. Address of Operator	,		10. Pool name or Wildcat	Hobbs (G/SA)			
HCR 1 Box 90 Denver City, 7	X 79323		To. Poor name of windeat	H0005 (0/5A)			
4. Well Location							
Unit Letter D : 717	Feet From The North Line	and 651 Feet	From The West	Line			
				-			
Section 34	Township 18-S	Range 38-E	NMPM	Lea County			
	11. Elevation (Show whether DF, RKB, R 3635' GL	I GR, etc.)					
Pit or Below-grade Tank Application	or Closure						
Pit Type Depth of Grou	nd Water Distance from neares	st fresh water well	Distance from nearest sur	rface water			
Pit Liner Thickness mil	Below-Grade Tank: Volume	bbls; Construction Mate	erial				
the second s							
12. Che NOTICE OF IN	ck Appropriate Box to Indicate Nature TENTION TO:		ther Data EQUENT REPORT OF	-			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	MEDIAL WORK	ALTERING	CASING			
	CHANGE PLANS CO	MMENCE DRILLING OPN		BANDONMENT			
PULL OR ALTER CASING	Multiple Completion CASING TEST AND CEMENT JOB						
OTHER:		HER: Casing integr	ity test	X			
 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: 09/17/2015							
Pressure Readings: Initial - 590 PS	Ending – 580 PSI						
Length of test: 30 minutes							
Witnessed: NO							
I hareby certify that the information above	s true and complete to the best of my knowledge	and helief. I further certify th	at any nit or helow-grade tank ha	as been/will be			
constructed or	strue and complete to the best of my knowledge	and benef. Traitiner certify a	at any pit of below-grade tank ha	is been will be			
closed according to NMOCD guideline		r an (attached) alternative	OCD-approved				
The		an					
SIGNATURE NUNC	A CLYDMAN II	TTLE Administrative A	Associate DATE	10/29/2015			
TYPE OR PRINT NAME Mendy A.	Johnson E-mail address: m	endy_johnson@oxy.com	TELEPHONE NO.	806-592-6280			
For State Use Only	X- I	010	r				
APPROVED BY	xernamake T	ITLE Statt	- Manager DATI	E 11/3/2013			

CONDITIONS OF APPROVAL IF ANY:

NOV 0 4 2015



American Valve & Meter, Inc. 1113 W. BROADWAY P.O. BOX 166 **HOBBS, NM 88240**

TO: Pate Trucking

DATE: 8.17.15

1.

This is to certify that:

I. Tony Flores, Technician for American Valve & Meter,

Inc., has checked the calibration of the following instrument.

8" pressure recorder Serial No: 12517

at these points.

Pressure 0-1000#			Temperature			
Test	Found	Left	Test	Found	Left	
Ð		Ð			$ \perp$	
500		500	***	<u> </u>		
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1000		1000	<u> </u>	A		
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Remark	(S:		~~			

Signature Jony Mous