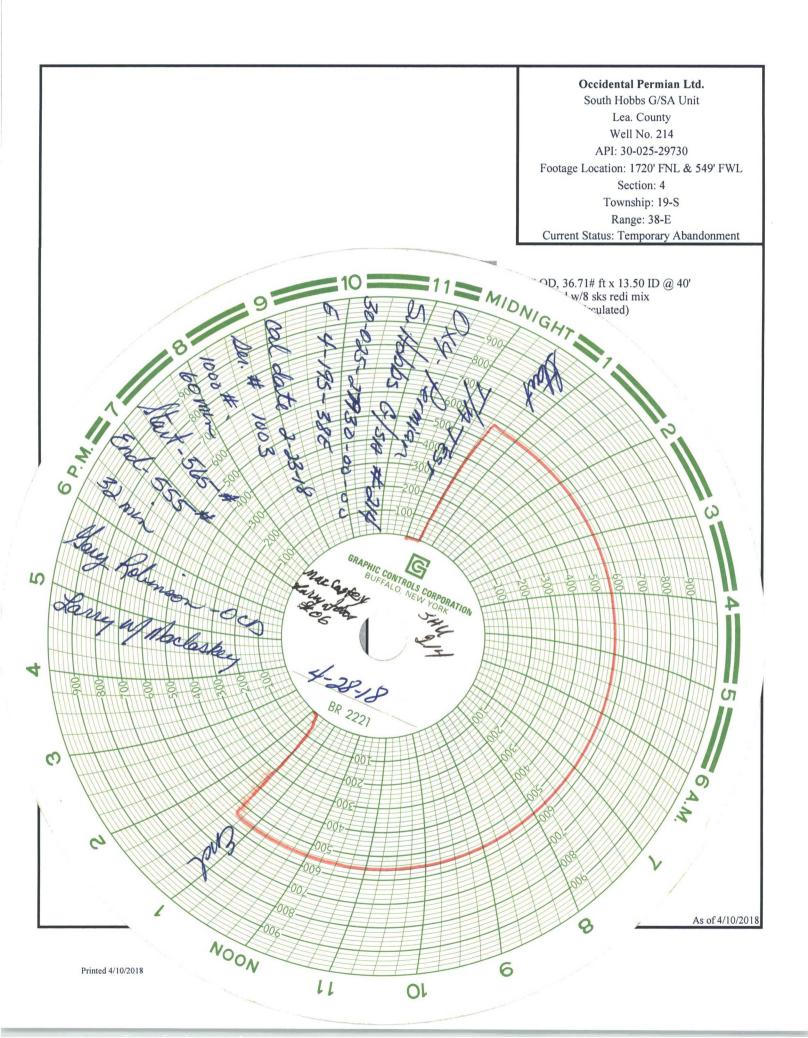
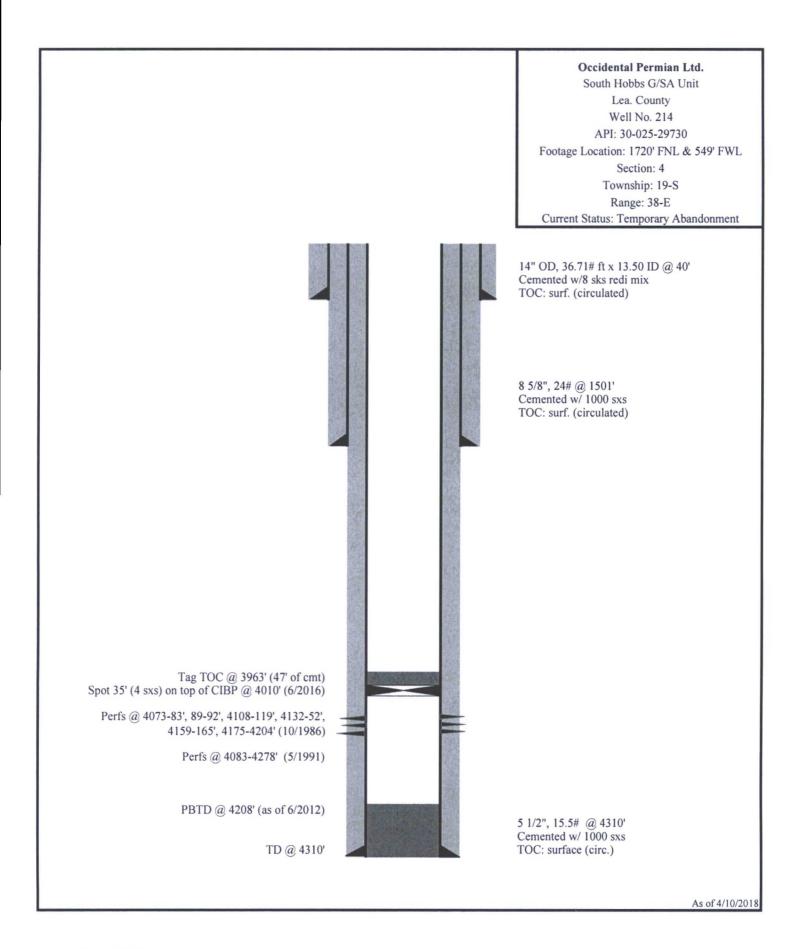
Submit 1 Copy To Appropriate District State of New M				
District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	ural Resources Revised July 18, 2013 WELL API NO.			
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210	30-025-29730			
	5 Indicate Type of Lease			
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NN 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 8	7505 6. State Oil & Gas Lease No.			
District IV – (505) 476-3460 1220 S. St. Francis Dr. Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELL	S 7. Lease Name or Unit Agreement Name			
(DO NOT USE THIS FORM FOR PROVISALS TO DRILL OR TO DEEPEN OR PI DIFFERENT RESERVOIR. USE "PERICATION FOR PERMIT" (FORM C-101) F	OR SUCH South Hobbs (G/SA) Unit			
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Temporal	0			
2. Name of Operator Occidental Permian, Ltd	9. OGRID Number 157984			
3. Address of Operator	10. Pool name or Wildcat			
HCR 1 Box 90 Denver City, TX 79323	Hobbs (G/SA)			
4. Well Location				
Unit Letter E : 1720 feet from the North				
Section 4 Township 19-S R 11. Elevation (Show whether DR				
3623' KB	, KD, KI, OK, <i>etc.)</i>			
12. Check Appropriate Box to Indicate N	lature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS	REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A			
PULL OR ALTER CASING MULTIPLE COMPL	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 NMA proposed completion or recompletion.	C. For Multiple Completions: Attach wellbore diagram of			
Date of test: 4/28/2018				
Pressure reading: Initial - 565 PSI Ending - 555 PSI				
Length of test: 32 minutes Witnessed: Yes - Gary Robinson - OCD				
This Anorous	al of Temporary			
Abandonme	nt Expires 4/28/2020			
Spud Date: Rig Release D	ate:			
I hereby certify that the information above is true and complete to the b	est of my knowledge and belief			
	est of my knowledge and bench.			
SIGNATURE ENdy CLAPHON TITLE Admi	n. Associate DATE 05/03/2018			
	s: mendy_johnson@oxy.com PHONE: 806-592-6280			
For State Use Only A				
APPROVED BY: MAUSTOCOUNTILE AO/II DATE 5/7/2018				
Conditions of Approval (if any):	1.1-00			
•				
RBDMS-	CHART-V			





Printed 4/10/2018

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

		BRADENHEAD TH	LSI REPORT				
Operator Name OCCIDENTAL PERMIAN, LTD					³ API Number 30-025-29730		
Property Name SOUTH HOBBS (G/SA) UNIT				Well No. 214			
		^{7.} Surface Loca	tion				
	wnship Range 19-S 38-E	Feet from 1720			E/W Line WEST	County LEA	
		Well Statu					
Well Status	SHUT-IN	PRODUCING	g 4-	DATE 26-18			
OPEN BI	RADENHEAD AND INT	ERMEDIATE TO ATMOSPH	ERE INDIVIDUALL	Y FOR 15 MINUT	ES EACH		
bradenhead flowed water, o	check all of the descriptio	OBSERVED DA	ATA				
	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Pro	d Csng	(E)Tubing	
ressure	NA	NA	NA		0	NONE	
ow Characteristics					0		
Puff	Y/N	Y/N	Y/N	(YN	-	
Steady Flow	Y/N	Y/N	Y / N		YN	-	
Surges	Y/N	Y/N	Y/N		Y/N	1	
Down to nothing	Y/N	Y/N	Y/N	C	Y/N	-	
Gas or Oil	Y/N	Y/N	Y / N		YO	1	
Water	Y/N	Y / N	Y/N Y		YN		
bradenhead flowed water, o	check all of the descriptio	ns that apply:					
LEAR	FRESH	SALTY	SULFU	R	BLACK		
emarks:			INJECTING AT	THIS TIME	WTR,GA	.S,CO2	

Signature: Mendy Ci John	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON	Entered into RBDMS
Title: ADMINISTRATIVE ASSOCIATE	Re-test
E-mail Address: mendy_johnson@oxy.com	
Date: 532018 Phone: 806-592-6280	
Witness: Jary Kobenson	

MACLASKEY OILFIELD SERVICES 5900 WEST LOVENGTON HWY. HOBBS.N.M. 85240

565-395-1016

THIS IS TO CERTIFY THAT: DATE 2-23-18

L <u>Rodrigues</u> METER TECHNICAN FOR MACLASKEY OLFIELD SERVICES, D.C. HAS CHECKED THE CALERATION ON THE FOLLOWING INSTRUMENT. <u>1000</u> PRESSURE RECORDER

SERIAL NUMBER

100 B

TESTED AT THESE POINTS.

PRESSURE		500		PRESSURE /000			
TEST	AS FOUND	CORRECTE	D	TEST	AS FOUND	CORRECT	i
0	110	V		500	600	V	
110	200	-		600	200		
200	300	. ~		200	500		
300	40 U	-	1.5	800	200		
400	500	~		200	1000	V	
110 200 200 200 400	200 300 400 500			600 700 800 200	900 500 700 1000	1	

REMARKS

1)