

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) 334-6172
1000 Rio Brazos Rd., El Paso, NM 88540
District IV - (505) 475-4460
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

WELL API NO. 30-025-43100
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
8. Well Number 268
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3616.3' KB

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 ☐ Gas Well ☐ Other 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 C : 179 feet from the North line and 1840 feet from the West line
Section 9 Township 19-S Range 38-E NMPM Lea County

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 ☒

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: 10/22/2018
Pressure readings: Initial - 550 PSI Ending - 510 PSI
Length of test: 32 minutes
Witnessed: YES - Kerry Fortner - NMOCD

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 Admin. Associate DATE 10/24/2018

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

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Supervisor DATE 11/16/18
Conditions of Approval (if any):

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 30-025-43100
Property Name SOUTH HOBBS (G/SA) UNIT	Well No. 268

7. Surface Location

UL - Lot C	Section 9	Township 19-S	Range 38-E	Feet from 179	N/S Line NORTH	Feet From 1840	E/W Line WEST	County LEA
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Well Status

Well Status	SHUT-IN N	PRODUCING INS	DATE 10-22-18	Wag Inspector
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Casing	(E)Tubing
Pressure	0			0	no Gauge
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	
Steady Flow	Y/N	Y/N	Y/N	Y/N	
Surges	Y/N	Y/N	Y/N	Y/N	
Down to nothing	Y/N	Y/N	Y/N	Y/N	
Gas or Oil	Y/N	Y/N	Y/N	Y/N	
Water	Y/N	Y/N	Y/N	Y/N	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:	INJECTING AT THIS TIME ___ WTR, ___ GAS, ___ CO2
<p>T86 PSI Sour Co.2 1200# water 1100#</p> <p>MTT/BHT (GARY Reed) MacLuskey ser# 0733 cal 9-25-18</p>	

Signature: <u>Mendy Johnson</u> 10/24/18	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON	Entered into RBDMS
Title: ADMINISTRATIVE ASSOCIATE	Re-test <u>jmh</u>
E-mail Address: <u>mendy_johnson@oxy.com</u>	
Date: <u>10-22-18</u>	Phone: 806-592-6280
Witness: <u>Kerry Fortner- O.C.D.</u> 399-3221	

MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS, NM 88240

505-395-1016

THIS IS TO CERTIFY THAT:

DATE 2-25-18

I, Albert Padilla METER TECHNICIAN FOR MACLASKEY OILFIELD SERVICES, INC. HAS CHECKED THE CALIBRATION ON THE FOLLOWING INSTRUMENT. 1000 PRESSURE RECORDER

SERIAL NUMBER

95001

TESTED AT THESE POINTS.

PRESSURE <u>500</u>		
TEST	AS FOUND	CORRECTED
<u>0</u>	<u>120</u>	<u>✓</u>
<u>100</u>	<u>200</u>	<u>✓</u>
<u>200</u>	<u>300</u>	<u>✓</u>
<u>300</u>	<u>400</u>	<u>✓</u>
<u>400</u>	<u>500</u>	<u>✓</u>

PRESSURE <u>1000</u>		
TEST	AS FOUND	CORRECT
<u>500</u>	<u>600</u>	<u>✓</u>
<u>600</u>	<u>700</u>	<u>✓</u>
<u>700</u>	<u>800</u>	<u>✓</u>
<u>800</u>	<u>900</u>	<u>✓</u>
<u>900</u>	<u>1000</u>	<u>✓</u>

REMARKS:

SIGNED: Albert Padilla