

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 88203
District III - (505) 334-6160
1000 Rio Brazos Rd., Artesia, NM 88203
District IV - (505) 486-1660
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. <u>30-025-43040</u>
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 <u>North Hobbs (G/SA) Unit</u>
8. Well Number <u>679</u>
9. OGRID Number <u>157984</u>
10. Pool name or Wildcat <u>Hobbs (G/SA)</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3622' GL</u>

SUNDRY SERVICES 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 Temporarily Abandoned

2. Name of Operator
Occidental Permian, Ltd

3. Address of Operator
1017 West Standolind Road, Hobbs NM, 88240

4. Well Location
Unit Letter H : 2157 feet from the North line and 637 feet from the East line
Section 24 Township 18-S Range 37-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3622' GL

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: ☐

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: 06-27-2019
Pressure Readings: Initial: 540 PSI Ending: 540 PSI
Length of test: 32 min
Witnessed: Yes - Gary Robinson - 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 [Signature] TITLE Well Surveillance Lead DATE 07/11/19

Type or print name Justin Saxon E-mail address: Justin_Saxon@Oxy.com PHONE: 575-397-8206

For State Use Only

APPROVED BY: [Signature] TITLE Supervisor's Office DATE 7-16-19

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 30-025-43040
Property Name NORTH HOBBS (G/SA) UNIT	Well No. 679

7. Surface Location

UL - Lot H	Section 24	Township 18-S	Range 37-E	Feet from 2157	N/S Line NORTH	Feet From 637	E/W Line EAST	County LEA
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Well Status

Well Status ACTIVE	SHUT-IN No	PRODUCING INT	DATE 6-27-19
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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 Csgng	(E)Tubing
Pressure	0	N/A	N/A	0	—
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

UIC

Signature:		OIL CONSERVATION DIVISION	
Printed name: MENDY JOHNSON		Entered into RBDMS	
Title: ADMINISTRATIVE ASSOCIATE		Re-test	
E-mail Address: mendy_johnson@oxy.com			
Date:	Phone: 806-592-6280		
Witness: <i>Mendy Johnson</i>			