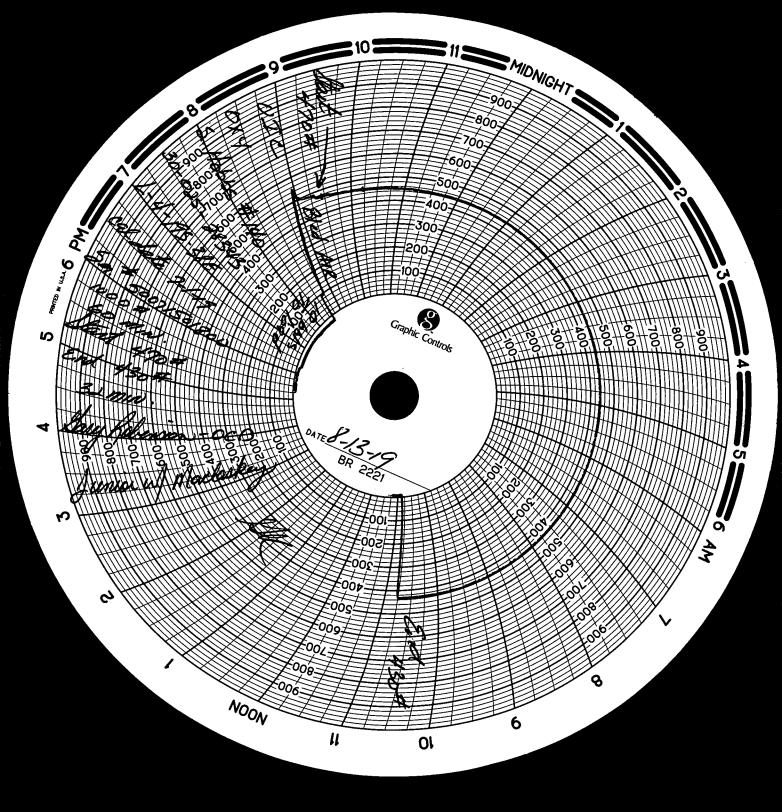
Submit I Copy To Appropriate District	State of New Mexico	Farme C 102
Office	Enormy Minanala and Natural Decay	Form C-103 Revised July 18, 2013
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resou	WELL API NO.
<u>District II</u> – (575) 748-1283	-OIL CONSERVATION DIVISI	ON 30-025-28343
District III – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Rice a Date	Santa Fe, NM 87505	STATE FEE X 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM, 2, 2019	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	o. State on te das Eedse No.
(DO NOT USE THIS FORM FOR PROPERVIEW	AND REPORTS ON WELLS ODRILL OR TO DEEPEN OR PLUG BACK TO ON FOR PERMIT" (FORM C-101) FOR SUCH	0 A
DIFFERENT RESERVOIR PROPOSALS.)		
1. Type of Well: Oil Well Gas	8. Well Number 140	
2. Name of Operator Occidental Permian, Ltd		9. OGRID Number 157984
3. Address of Operator		10. Pool name or Wildcat
1017 West Stanolind Road, Ho	bbs, NM 88240	Hobbs (G/SA)
4. Well Location		
Unit Letter L : 14	485 feet from the South line	and 1245 feet from the West line
Section 4	Township 19-S Range 38-E	
11	. Elevation (Show whether DR, RKB, RT, 3605' GR	GR, etc.)
L		
12. Check App	opriate Box to Indicate Nature of	Notice, Report or Other Data
		SUBSEQUENT REPORT OF: ALWORK
	—	
PULL OR ALTER CASING		
		· ·
		Casing Integrity Test
OTHER: 13 Describe proposed or completed		etails, and give pertinent dates, including estimated date
of starting any proposed work).	SEE RULE 19.15.7.14 NMAC. For Mu	Itiple Completions: Attach wellbore diagram of
proposed completion or recomp	etton.	
Date of test: 08/10/2019 Pressure readings: Initial -	470 PSI Ending - 430 PSI	
Length of test: 32 minutes	0	
Witnessed: Yes - Gary Rol	binson - NMOCD	
Spud Date:	Rig Release Date:	
Spud Date.		
I hereby certify that the information aboy	e is true and complete to the best of my k	nowledge and belief.
SIGNATURE	TITLE Well Surveillan	ce Lead DATE 8-21-19
Type or print name Justin Saxon	E-mail address: justin_	
For State Use Only		
	`	Ollin DATE 8-26-19
APPROVED BY: <u>Cluy follow</u> Conditions of Approval (if any):	TITLE Coplanie	Office DATE DATE
Containing of Approval (11 any).		V



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

					NHEAD TE	ST REPOR	Г			
Operator Name OCCIDENTAL PERMIAN, LTD							<sup>3</sup> API Number 30-025-28343			
Property Name SOUTH HOBBS (G/SA) UNIT							Well No. 140			
	<sup>7.</sup> Surface Location									
UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet Fr		E/W Line	County
L 4 19-S 38-E 1485 SOUTH 1245 WEST LEA Well Status										LEA
			011177101				D 4 775			
Well Act	Status		SHUT-IN					9		
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH OBSERVED DATA If bradenhead flowed water, check all of the descriptions that apply:										
Processes		<u>(A)51</u>	rf-Interm	(B)Interm(	<u>1)-Interm(2)</u>	(C)Interm-Prod		(D)Prod Csng		(E)Tubing
	Pressure Flow Characteristics		0	N	¥#	NA		Ha	3	1103
Puff				· · · · · · · · · · · · · · · · · · ·	Y / N	·····	u –	Y / N		4
Steady F		'	YQ		Y / N	Y/1			7 N	4
Surge			Y K		Y/N	Y/ 1		Y/N		-
Down to no			(Y) N		Y/N		N	Y/N		-
Gas or Oil			¥Q		Y / N		Y / N		// N	-
Water			YN		¥7 N	Y/N		Y/N		
If bradenhead flowed water, check all of the descriptions that apply:										
CLEAR		FRE	SH	S	ALTY	SULF	UR		BLACK	
Remarks: NJECTING AT THIS TIMEWTR,GAS,CO2 UIC Prod. CSG-265 PSI - blew to Atmosphere thru 3/4 "valve to 2000/165, in 10 m:N. Shut in + went to next										
Well. Left M. 5 PSI @ 12:45 Pm.										
1: 20 PM- 54.8 PSI OKBHT 2: 40 PM-57.9 PSI										
8-13-19 7:45 AM 59.0 PSI - blew to ZERO IN 5 mm.										

Signature:		OIL CONSERVATION DIVISION			
Printed name: MENDY JOHNSO	N	Entered into RBDMS	M		
Title: ADMINISTRATIVE ASSO	CIATE	Re-test J.O			
E-mail Address: mendy_johnson@	<u>Poxy.com</u>				
Date:	Phone: 806-592-6280	,			
	Witness: Jour Kornso				
	0.70	1			