Submit 1 Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013						
District I – (575) 393-6161 1625 N. French Dr. Hobb, NM 88240	WELL API NO.							
District II - (5, 5) 48-1283 811 S. Fris S., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-07652						
District III - (505) 33466 178	1220 South St. Francis Dr.	5. Indicate Type of Lease						
1000 Rio Brazos Rd Aztec, NM 87410 District IV - 1995) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.						
1220 S. St. Francis Dr., Sentere, TVM 87505								
(DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name						
DIFFERENT RESERVOIR. USE "APPLI PROPOSALS.)	South Hobbs (G/SA) Unit							
1. Type of Well: Oil Well	8. Well Number 61							
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 C	ity, TX 79323	Hobbs (G/SA)						
4. Well Location	220 fact from the Newther Line and	200 fact from the Fact line						
Unit Letter A : Section 8		<u>330</u> feet from the <u>East</u> line NMPM Lea County						
Section 8	Iownship 19-S Range 38-E 11. Elevation (Show whether DR, RKB, RT, GR, etc.							
	3598' GL	/						
12. Check	Appropriate Box to Indicate Nature of Notice,	Report or Other Data						
NOTICE OF I	NTENTION TO: SUE	SEQUENT REPORT OF:						
PERFORM REMEDIAL WORK								
	—	IT JOB						
DOWNHOLE COMMINGLE								
OTHER:	OTHER:Casing in	tegrity 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 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.								
Date of test: 11/1/2019 Pressure readings: Initial - 580 PSI Ending - 565 PSI Length of test: 32 minutes								
Witnessed: Yes - Ke	rry Fortner - NMOCD							
	THAL TA STATU	S-EXTENSION						
FINAL TA STATUS- EXTENSION Approval of TA EXPIRES:								
Approval of TA EAT UGGED OR RETURNED								
	to PRODUCTION	BOVE:						
	to PRODUCTION BY THE DATE STATED A							
Spud Date:	ري Kelease Date:							
I hereby certify that the information	above is true and complete to the best of my knowledge	ge and belief.						
1	0							
SIGNATURE								
Type or print name Justin Saxo	n E-mail address: justin_saxon@	Doxy.com PHONE: 575-397-8206						
For State Use Only	A	~						
APPROVED BY: YOUNG 3	nteTITLE <u>C.D</u>	DATE//_27-/9						
Conditions of Approval (if any):								

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

BRADENHEAD TEST REPORT

r			Onomt	BRADENHEAD TE	SI KEPUKI		A DI NIL	
Operator Name OCCIDENTAL PERMIAN, LTD						³ API Number 30-025-07652		
Property Name SOUTH HOBBS (G/SA) UNIT						-	Well No. 61	
				^{7.} Surface Locati	on			
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
A	8	19-S	38-E	330	NORTH	330	EAST	LEA
				Well Status				
Well	Status		SHUT-IN					
			¥	INT				
1 F) OPE	N BRADEN	HEAD AND INT	ERMEDIATE TO ATMOSPHE		Y FOR 15 MINUTH	IS EACH	
If bradenhead	flowed wa	ter, check al	l of the descriptio	OBSERVED DA ns that apply:	ТА			
		<u>(A)S</u>	urf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod	Csng	(E)Tubing
Pressure			NA	NA	N A		0	0
Flow Charac	teristics						•	TA
Puff			Y/N	Y/N	Y/N		YT N] ' ''
•	Steady Flow		Y/N	Y/N	Y/N		Y/07	
Surges			Y/N Y/N	Y / N Y / N	Y/N Y/N	· · .	Y/1¢7 ∮7/N	4
Down to nothing Gas or Oil			Y/N	Y/N	Y/N	-	Y/N Y/(N)	_
Water			Y/N	Y / N	Y/N		Υ/ β	-
If bradenhead flowed water, check all of the descriptions that apply:								
CLEAR		FRE		SALTY	SULFU	R	BLACK	
Remarks: INJECTING AT THIS TIMEWTR,GAS,CO2								
TP STATUS Test								
TP STAtus Trest (JR) Machaskey								
ser# 500-7150-1800								
Cal 11/1/19								
				5 580	E 56	5		

Signature:		OIL CONSERVATION DIVISION		
Printed name: Justin Saxon		Entered into RBDMS		
Title: Well Surveillance Lead		Re-test		
E-mail Address: justin_saxon@oxy.com				
Date: 11/18/19 PI	hone: 575-397-8206			
W	inness: Kerry Fortwer - OCD	/		
	399-3221			

