

District 1  
 1625 N. French Dr., Hobbs, NM 88240  
 Phone: (575) 393-6161 Fax: (575) 393-0720

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

Operator Name <b>OCCIDENTAL PERMIAN LTD</b>	API Number <b>30-025-26119</b>
Property Name <b>SOUTH HOBBS G/SA UNIT</b>	Well No. <b>124</b>

Surface Location									
UL-Lot	Section	Towship	Range		Feet From	N/S Line	Feet From	E/W Line	County
	4	19S	38E		1925	S	2380	E	LEA

Well Status							
TA'D Well	SHUT-IN		INJECTOR		PRODUCING		DATE
<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No		INJ	SWD	<input checked="" type="radio"/> OIL <input type="radio"/> GAS		<b>4-18-2023</b>

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

**OBSERVED DATA**

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

	(A) Surf-Interm	(B) Intern-Interm(2)	(C) Internm-Prod	(D) Prod Csnrg	(E) Tubing
Pressure	0	NA	NA	0	NA
<b>Flow Characteristics</b>					
Puff	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / <input checked="" type="radio"/> N	CO <sub>2</sub> _____
Steady Flow	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / <input checked="" type="radio"/> N	WTR _____
Surges	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / <input checked="" type="radio"/> N	GAS _____
Down to nothing	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Type of Fluid _____
Gas or Oil	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / <input checked="" type="radio"/> N	Injected for _____
Water	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	Y / <input checked="" type="radio"/> N	Water Flood if applies _____

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continous build up if applies.

TA'D Well (Tubing NA )  
 Prod CSNG Bled from 0 to 0  
 Bradenhead bled from 0 to 0

Kevin Whitaker 915-630-6358 DANOS

Signature: <i>Brian Bayer</i>	OIL CONSERVATION DIVISION Entered into RBDMS Re-test
Printed name: Brian Bayer	
Title: Well Surveillance Lead	
E-mail Address: brian_bayer@oxy.com	
Date:	
Phone: 432.758.6701	
Witness:	

**District I**  
 1625 N. French Dr., Hobbs, NM 88240  
 Phone:(575) 393-6161 Fax:(575) 393-0720

**District II**  
 811 S. First St., Artesia, NM 88210  
 Phone:(575) 748-1283 Fax:(575) 748-9720

**District III**  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 Phone:(505) 334-6178 Fax:(505) 334-6170

**District IV**  
 1220 S. St Francis Dr., Santa Fe, NM 87505  
 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 224987

**CONDITIONS**

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 224987
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

**CONDITIONS**

Created By	Condition	Condition Date
kfortner	None	9/25/2024