

District I  
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<br><b>Occidental Permian Ltd</b> | API Number<br><b>30-025-05600</b> |
| Property Name<br><b>East Eumont Unit</b>       | Well No.<br><b>041</b>            |

## 2. Surface Location

|                      |                      |                        |                     |                          |                          |                          |                         |                      |
|----------------------|----------------------|------------------------|---------------------|--------------------------|--------------------------|--------------------------|-------------------------|----------------------|
| UL - Lot<br><b>E</b> | Section<br><b>15</b> | Township<br><b>19S</b> | Range<br><b>37E</b> | Feet from<br><b>1980</b> | N/S Line<br><b>North</b> | Feet From<br><b>Lebo</b> | E/W Line<br><b>West</b> | County<br><b>Lea</b> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|--------------------------|--------------------------|-------------------------|----------------------|

## Well Status

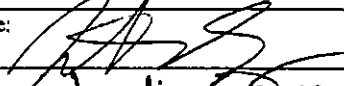
|                  |                                     |                |    |                                                  |     |     |                 |                         |
|------------------|-------------------------------------|----------------|----|--------------------------------------------------|-----|-----|-----------------|-------------------------|
| TA'D WELL<br>YES | <input checked="" type="radio"/> NO | SHUT-IN<br>YES | NO | INJECTOR<br><input checked="" type="radio"/> INJ | SWD | OIL | PRODUCER<br>GAS | DATE<br><b>10-05-20</b> |
|------------------|-------------------------------------|----------------|----|--------------------------------------------------|-----|-----|-----------------|-------------------------|

OBSERVED DATA

|                      | (A)Surface                             | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg                            | (E)Tubing                                                 |
|----------------------|----------------------------------------|--------------|--------------|----------------------------------------|-----------------------------------------------------------|
| Pressure             | <b>E</b>                               |              |              | <b>Ø</b>                               |                                                           |
| Flow Characteristics |                                        |              |              |                                        |                                                           |
| Puff                 | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | CO2 <input type="checkbox"/>                              |
| Steady Flow          | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | WTR <input type="checkbox"/>                              |
| Surges               | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | GAS <input type="checkbox"/>                              |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N        | Y / N        | <input checked="" type="radio"/> Y / N | Type of Fluid<br>Injected for<br>Waterflood if<br>applies |
| Gas or Oil           | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                           |
| Water                | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                           |

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

**Josh Schut M 701 690 7053**

|                                                                                                |                           |
|------------------------------------------------------------------------------------------------|---------------------------|
| Signature:  | OIL CONSERVATION DIVISION |
| Printed name: <b>Justin Saxon</b>                                                              | Entered into RBDMS        |
| Title: <b>Well Surveillance Lead</b>                                                           | Re-test                   |
| E-mail Address: <b>Justin.Saxon@oay.com</b>                                                    | <b>K F</b>                |
| Date:                                                                                          |                           |
| Phone: <b>575-397-8206</b>                                                                     |                           |
| Witness:                                                                                       |                           |

INSTRUCTIONS ON BACK OF THIS FORM

**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 14401

**CONDITIONS OF APPROVAL**

|              |                                |               |                      |        |        |                |       |              |        |
|--------------|--------------------------------|---------------|----------------------|--------|--------|----------------|-------|--------------|--------|
| Operator:    | OXY USA WTP LIMITED PARTNERSHI | P.O. Box 4294 | Houston, TX772104294 | OGRID: | 192463 | Action Number: | 14401 | Action Type: | C-103Z |
| OCD Reviewer | Condition                      |               |                      |        |        |                |       |              |        |
| kfortner     | None                           |               |                      |        |        |                |       |              |        |