

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 88210

District III - (505) 334-6178

1000 Rio Brazos Rd., Aztec, NM 87410

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

Revised July 18, 2013

SUNDRY NOTICES 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)		WELL API NO. 30-025-42471
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>		6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs Unit (G/SA) Unit		8. Well Number 957
9. OGRID Number 157984		10. Pool name or Wildcat Hobbs (G/SA)
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		
2. Name of Operator Occidental Permian, Ltd		
3. Address of Operator 1017 W Stanolind Rd, Hobbs NM 88240		
4. Well Location Unit Letter <u>P</u> .839 feet from the <u>SOUTH</u> line and <u>88</u> feet from the <u>EAST</u> line Section <u>18</u> Township <u>18S</u> Range <u>38E</u> NMPM County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

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 8/5/2020
PRESSURE TEST READING START 610PSI AND ENDING 600 PSI
LENGTH OF TEST 60 MINUTES
WITNESSED- NO**FINAL TA STATUS- EXTENSION**Approval of TA EXPIRES: 8/5/25Well needs to be **PLUGGED OR RETURNED**
to **PRODUCTION**BY THE DATE STATED ABOVE: K 7

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

TITLE Well Surveillance LeadDATE 10-7-20Type or print name Justin SaxonE-mail address: justin_saxon@oxy.comPHONE: 575-397-8206

For State Use Only

APPROVED BY:

Kerry Fortner

TITLE

Compliance Officer ADATE 8/31/21

Conditions of Approval

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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. 30-025-42471
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
8. Well Number 957
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3678' KB

SUNDRY NOTICES 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Occidental Permian LTD	
3. Address of Operator PO Box 4294 Houston, TX 77210	
4. Well Location Unit Letter _____ P : 839 feet from the _____ S line and 885 feet from the _____ E line Section 18 Township 18S Range 38E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3678' KB	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: TA'd <input checked="" type="checkbox"/>	

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.

08/04/20 MIRU x NDWH x NUBOP. Tbg had 500psi, csg 500psi. Killed well w/ 130 bbls 10# brine water.
 POOH 125 jts 2 7/8" tbg x esp equipment. RIH 7" cibp x dumped 4 sxs cmt inside tbg.
 RIH 115 2 7/8" jts tbg x set cibp @4175'. Dumped 25' cmt x circulated w/ 150 bbls packer fluid.
 08/04/20 Tagged toc @4146'. Ran MIT. RD x NDBOP x NUWH. *** Well is currently TA'd ***

Spud Date:

08/04/2020

Rig Release Date:

08/04/2020

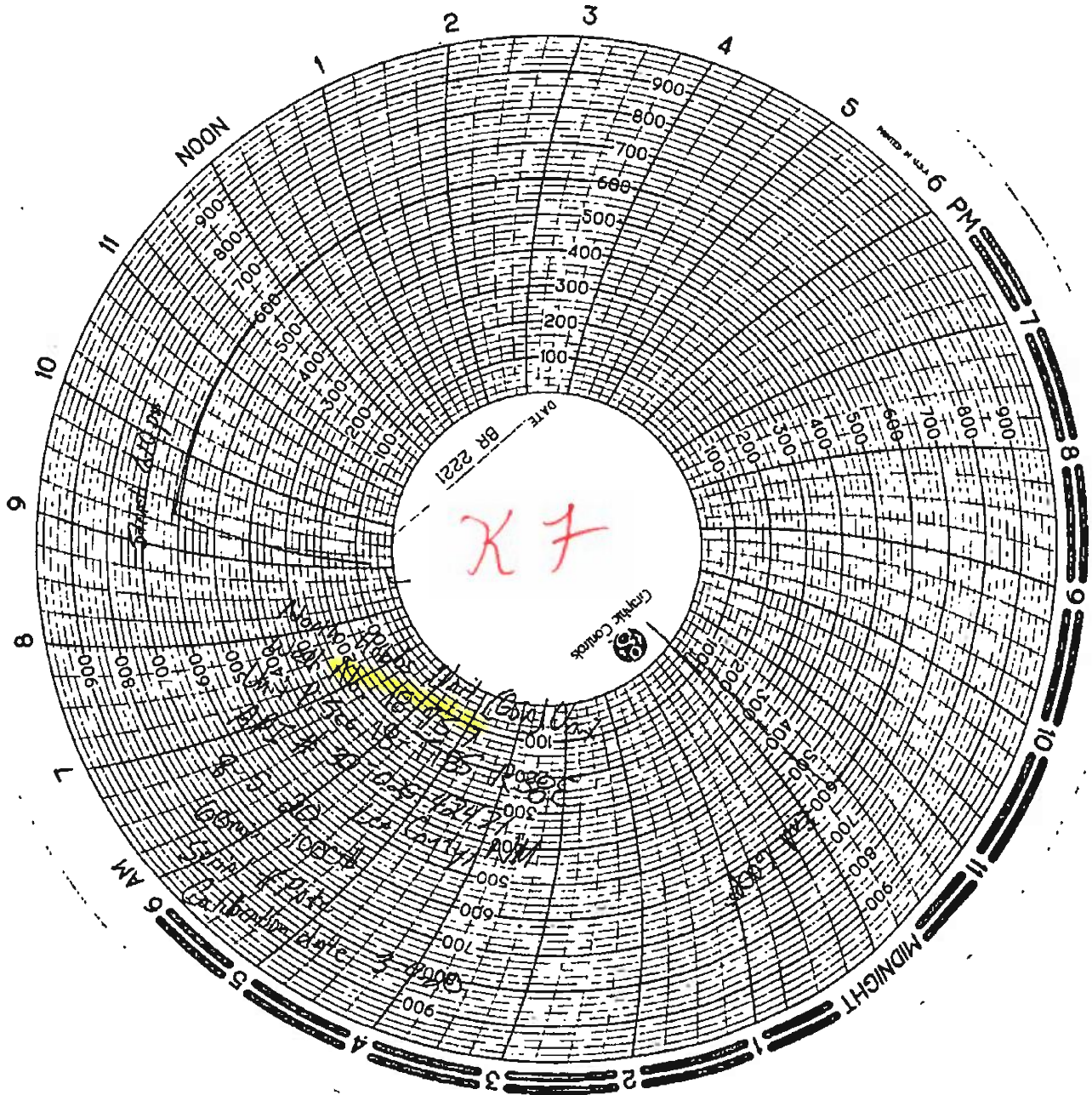
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE April Santos TITLE Regulatory Specialist DATE 01/16/2020

Type or print name April Santos E-mail address: April_Hood@Oxy.com PHONE: 713-366-5771

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 8/31/21
 Conditions of Approval



District
1535 N. French Dr., Hobbs, NM 88240
Phone (575) 393-4161 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 <i>Oxy USA</i>		API Number <i>30-025-42471</i>	
Property Name <i>North Hobbs Unit</i>		Well No <i>18-957</i>	
Surface Location			
UL - Lot <i>P</i>	Section <i>18</i>	Township <i>18S</i>	Range <i>38E</i>
Feet from		N/S Line	Feet from
E/W Line		County <i>Lea</i>	
Well Status			
TA'D WELL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJ <input type="checkbox"/>	PRODUCER <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS
			DATE <i>8-5-20</i>

OBSERVED DATA

	(A) Surface	(B) Intern(1)	(C) Intern(2)	(D) Prod. Casing	(E) Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>N/A</i>
Flow Characteristics					
Puff	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	WTR <input type="checkbox"/>
Surges	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	GAS <input type="checkbox"/>
Down to nothing	<i>(Y) / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>(Y) / N</i>	Type of fluid injected for workover of well <input type="checkbox"/>
Gas or Oil	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	
Water	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	

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

Calibration date: *3-4-20*

Serial # *Pate*

Start 610 psi End 600psi Well is now TA'D

Signature: <i>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name		Entered into RBDMS	
Title		Re-test	
E-mail Address:			
Date	Phone		
Witness:		<i>K F</i>	

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 20724

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 20724
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	8/31/2021