

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

District II  
811 S 1st Street, Artesia, NM 88210  
Phone: (575) 748-1283 - Fax: (575) 748-9720

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

BRADENHEAD TEST REPORT

|                                         |                            |
|-----------------------------------------|----------------------------|
| Operator Name<br>OCCIDENTAL PERMIAN LTD | API Number<br>30-025-29891 |
| Property Name<br>SOUTH HOBBS G/SA UNIT  | Well No.<br>220            |

Surface Location

|         |              |                 |              |                   |               |                   |               |               |
|---------|--------------|-----------------|--------------|-------------------|---------------|-------------------|---------------|---------------|
| UL -Lot | Section<br>4 | Township<br>19S | Range<br>38E | Feet From<br>1425 | N/S Line<br>N | Feet From<br>1480 | E/W Line<br>W | County<br>LEE |
|---------|--------------|-----------------|--------------|-------------------|---------------|-------------------|---------------|---------------|

Well Status

|                                                                            |                                                                          |                     |                      |                  |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------|----------------------|------------------|
| TA'D Well<br><input checked="" type="radio"/> Yes <input type="radio"/> No | SHUT-IN<br><input checked="" type="radio"/> Yes <input type="radio"/> No | INJECTOR<br>INJ SWD | PRODUCING<br>OIL GAS | DATE<br>07-26-21 |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------|----------------------|------------------|

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

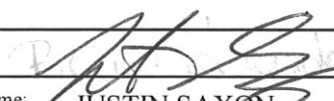
OBSERVED DATA

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

|                      | (A) Surface                            | (B)Interm(1) | (C)Interm(2) | (D)Prod Csng                           | (E)Tubing                                                                                                                    |
|----------------------|----------------------------------------|--------------|--------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Pressure             | 0                                      | NA           | NA           | 0 #                                    | 0                                                                                                                            |
| Flow Characteristics |                                        |              |              |                                        | CO <sub>2</sub> _____<br>WTR _____<br>GAS _____<br>Type of Fluid _____<br>Injected for _____<br>Water Flood if applies _____ |
| Puff                 | Y / N                                  | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                                                                                              |
| Steady Flow          | Y / N                                  | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                                                                                              |
| Surges               | Y / N                                  | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                                                                                              |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N        | Y / N        | <input checked="" type="radio"/> Y / N |                                                                                                                              |
| Gas or Oil           | Y / N                                  | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                                                                                              |
| Water                | Y / N                                  | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N |                                                                                                                              |

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

Robert Aranda 432-209-7116

|                                                                                                |                                                                                               |
|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Signature:  | OIL CONSERVATION DIVISION                                                                     |
| Printed name: JUSTIN SAXON                                                                     | Entered into RBDMS                                                                            |
| Title: SURVEILLANCE LEAD                                                                       | Re-test  |
| E-mail Address: JUSTIN_SAXON@OXY.COM                                                           |                                                                                               |
| Date:                                                                                          |                                                                                               |
| Phone: 806-215-3664                                                                            |                                                                                               |
| 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 52771

CONDITIONS

|                                                                               |                                                            |
|-------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>OCCIDENTAL PERMIAN LTD<br>P.O. Box 4294<br>Houston, TX 772104294 | OGRID:<br>157984                                           |
|                                                                               | Action Number:<br>52771                                    |
|                                                                               | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

| Created By | Condition | Condition Date |
|------------|-----------|----------------|
| kfortner   | None      | 3/2/2022       |