

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 Resources

Form C-103  
 Revised July 18, 2013

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

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. <b>30-025-05478</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>Injector</b>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>Occidental Permian LTD</b>		6. State Oil & Gas Lease No. <b>19520</b>
3. Address of Operator <b>P.O. Box 4294 Houston, TX 77210-4294</b>		7. Lease Name or Unit Agreement Name <b>North Hobbs G/SA Unit</b>
4. Well Location Unit Letter <b>H</b> : <b>2310</b> feet from the <b>NORTH</b> line and <b>330</b> feet from the <b>EAST</b> line Section <b>24</b> Township <b>18S</b> Range <b>37E</b> NMPM County <b>LEA</b>		8. Well Number <b>422</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3660' GL</b>		9. OGRID Number <b>157984</b>
		10. Pool name or Wildcat <b>HOBBS; GRAYBURG-SAN ANDRES</b>

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 checked="" 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.

9/24/21: Mipu, mi equipment, rupu, ru equipment, tbq had 400psi, csg had 100psi, bled csg off, pumped 50bbls down tbq, well went on vacuum, tested csg to 600psi which held good, ruwl, set 1.87bp, rdwl, and tested tbq to 2200psi which lost 60psi in 10 mins. Ndwh, nubop, ru workfloor, ruwl, fished bp, rdwl, unset inj pkr, pooh w/123jts of duoline, inj pkr, and sion.

9/25/21: Held TGSM, csg had 0psi, killed well, rih w/Oxy stock 5.5" ASX-1 inj pkr, ru Hydrostatic testers, rih hydrotesting 123jts, found 2jts with bad liners, jt# 122 from surf, jts #3 from surface, set inj pkr @3947', rd hydrotesters, tested csg to 600psi which held, unjayed off on&off tool, circ well w/80bbls of 10#pkr fluid, and latched back onto inj pkr. Rd workfloor, ndbop, nuwh, hooked up inj line, ran MIT chart on csg to 600psi, pumped out pump out plug, pumped 50bbls down tbq pumping 2,8bpm @1200psi, rdpu, rd equipment, cleaned location, and moved off of location.

Spud Date:

9/24/21

Rig Release Date:

9/25/21

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

SIGNATURE Roni Mathew TITLE Regulatory Analyst, Sr. DATE 02/16/2022

Type or print name Roni Mathew E-mail address: roni\_mathew@oxy.com PHONE: (713) 215-7827

**For State Use Only**

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 10/6/22  
 Conditions of Approval (see back)

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 <b>OXY Permian</b>		API Number
Property Name <b>NORTH HOBBS (GSA) UNIT</b>		Well No. <b>24-422</b>

1. Surface Location									
UL - Lot <b>H</b>	Section <b>24</b>	Township <b>18S</b>	Range <b>37E</b>		Feet from	N/S Line	Feet From	E/W Line	County <b>Lea</b>

Well Status										
YES	TA'D WELL <b>(NO)</b>	YES	SHUT-IN <b>(NO)</b>	<b>(INJ)</b>	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE <b>9-25-21</b>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>N/A</b>			
Flow Characteristics					
Puff	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	CO2 <b>(✓)</b>
Steady Flow	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	WTR <b>(✓)</b>
Surges	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	Y <b>(N)</b>	GAS <b>(✓)</b>
Down to nothing	<b>(Y)</b> N	Y <b>(N)</b>	Y <b>(N)</b>	<b>(N)</b> N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y <b>(N)</b>	Injected for
Water	Y / N	Y / N	Y / N	Y <b>(N)</b>	Waterflood if
					applies

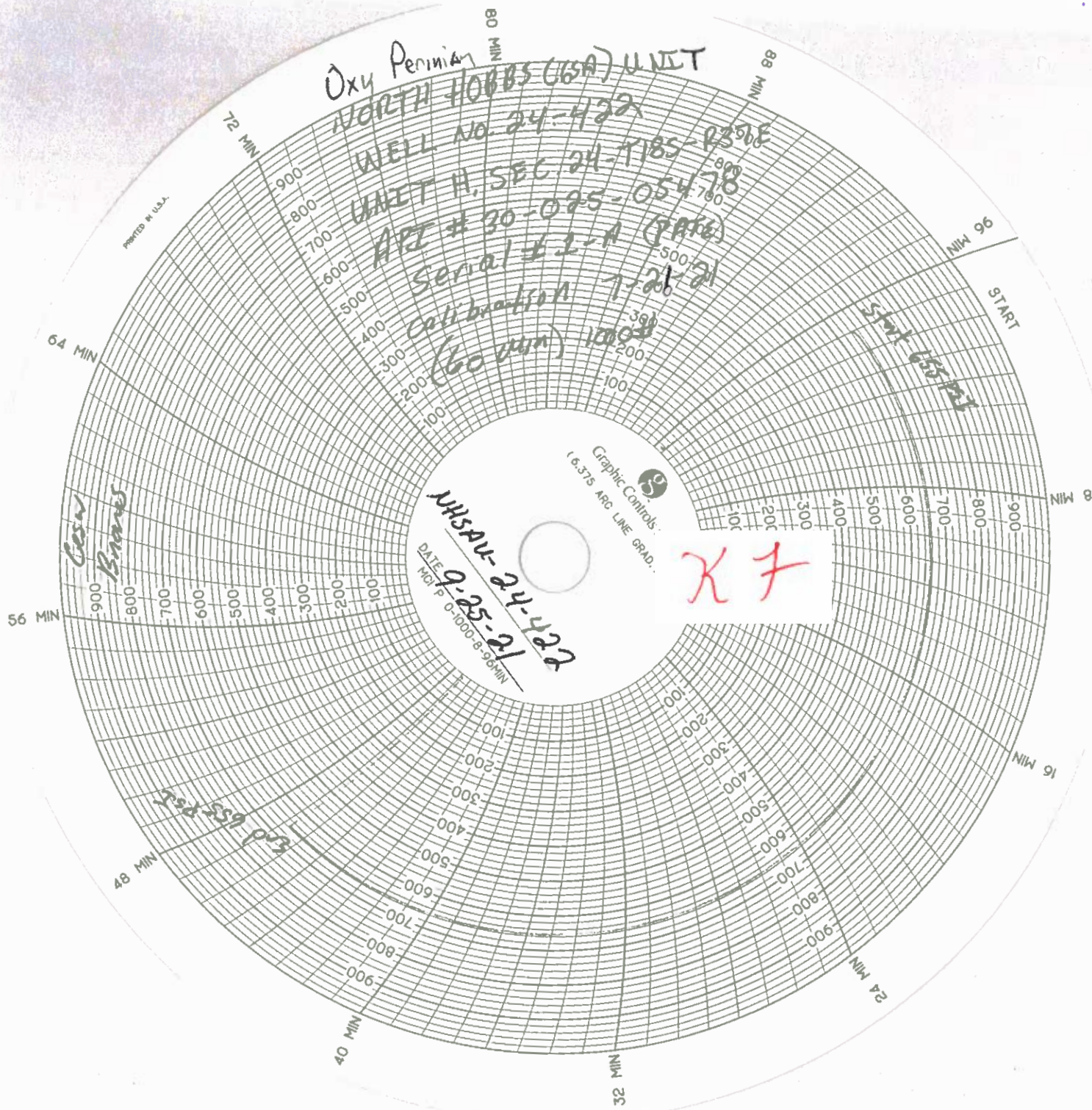
Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**Post workover MTR**  
**Serial 1-A (Rate)**  
**calibration 7-21-21**  
**Start - 655 PSI**  
**End - 655 PSI**

Alfredo Cenicerros - Oxy Rep  
**806-215-2885**

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date:	Phone:	
Witness:		

INSTRUCTIONS ON BACK OF THIS FORM



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CONDITIONS  
  
Action 82135

CONDITIONS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 82135
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	10/6/2022