

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>30-025-24665</b>	
Property Name <b>NORTH HOBBS G/SA UNIT</b>		Well No. <b>341</b>	

Surface Location									
UL -Lot	Section	Township	Range		Feet From	N/S Line	Feet From	E/W Line	County
	30	18S	38E		990	S	1650	E	LEA

Well Status					DATE	
TA'D Well	SHUT-IN	INJECTOR	PRODUCING			
Yes	<input checked="" type="radio"/> No	Yes	<input checked="" type="radio"/> No	INJ SWD	<input checked="" type="radio"/> OIL <input type="radio"/> GAS	<b>5-5-2023</b>

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH  
**OBSERVED DATA**

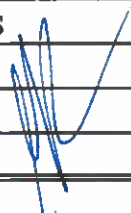
If bradenhead flowed water, check all of the sdescriptions that apply:

	(A) Surf-Interm	(B)Interm-Interm(2)	(C)Interm-Prod	(D)Prod Csmg	(E)Tubing
Pressure	<b>0</b>	<b>5</b>	<b>NA</b>	<b>390</b>	<b>417</b>
<b>Flow Characteristics</b>					CO <sub>2</sub> _____
Puff	Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / N	WTR _____
Steady Flow	Y <input checked="" type="radio"/> N	Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	GAS _____
Surges	Y <input checked="" type="radio"/> N	Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	Type of Fluid _____
Down to nothing	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	Injected for _____
Gas or Oil	Y <input checked="" type="radio"/> N	Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	Water Flood if _____
Water	Y <input checked="" type="radio"/> N	Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	applies _____

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

**(B) Interm - Interm (2) bled to 0 in 1 sec (D&V)**

**Kevin Whitaker 915-630-6358 DANOS**

Signature: <b>Brian Bayer</b>	OIL CONSERVATION DIVISION Entered into RBDMS Re-test 
Printed name: <b>Brian Bayer</b>	
Title: <b>Well Surveillance Lead</b>	
E-mail Address: <b>brian_bayer@oxy.com</b>	
Date: _____ Phone: <b>432.758.6701</b>	
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 238548

**CONDITIONS**

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 238548
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

**CONDITIONS**

Created By	Condition	Condition Date
kfortner	None	7/27/2023