

## 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<br><b>OCCIDENTAL PERMIAN LTD</b> | API Number<br><b>30-025-36216</b> |
| Property Name<br><b>NORTH HOBBS G/SA UNIT</b>  | Well No.<br><b>#525</b>           |

**Surface Location**

|         |                      |                        |                     |  |                          |                      |                          |                      |                      |
|---------|----------------------|------------------------|---------------------|--|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL -Lot | Section<br><b>30</b> | Township<br><b>18S</b> | Range<br><b>38E</b> |  | Feet From<br><b>1947</b> | N/S Line<br><b>S</b> | Feet From<br><b>2139</b> | E/W Line<br><b>W</b> | County<br><b>Lea</b> |
|---------|----------------------|------------------------|---------------------|--|--------------------------|----------------------|--------------------------|----------------------|----------------------|

**Well Status**

|                                                                    |                                                                  |                                   |                                                          |                         |
|--------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------|-------------------------|
| TA'D Well<br><b>Yes</b> <input checked="" type="radio"/> <b>No</b> | SHUT-IN<br><b>Yes</b> <input checked="" type="radio"/> <b>No</b> | INJECTOR<br><b>INJ</b> <b>SWD</b> | PRODUCING<br><input checked="" type="radio"/> <b>GAS</b> | DATE<br><b>07-29-20</b> |
|--------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------|-------------------------|

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) Surf-Interm | (B) Interm-Interm(2) | (C) Interm-Prod | (D) Prod Csng | (E) Tubing            |
|----------------------|-----------------|----------------------|-----------------|---------------|-----------------------|
| Pressure             | <b>0</b>        |                      |                 | <b>392</b>    | <b>410</b>            |
| Flow Characteristics |                 |                      |                 |               | CO <sub>2</sub> _____ |
| Puff                 | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | WTR _____             |
| Steady Flow          | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | GAS _____             |
| Surges               | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | Type of Fluid _____   |
| Down to nothing      | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | Injected for _____    |
| Gas or Oil           | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | Water Flood if _____  |
| Water                | <b>Y / N</b>    | <b>Y / N</b>         | <b>Y / N</b>    | <b>Y / N</b>  | applies _____         |

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

Josh Saxon M 7016907053

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| Signature:                                  | <b>OIL CONSERVATION DIVISION</b> |
| Printed name: <b>JUSTIN SAXON</b>           | Entered into RBDMS               |
| Title: <b>WELL SURVEILLANCE LEAD</b>        | Re-test                          |
| E-mail Address: <b>Justin.Saxon@oxy.com</b> |                                  |
| Date:                                       | Phone: <b>575-397-8206</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 17218

**CONDITIONS OF APPROVAL**

|              |                        |               |                      |        |        |                |       |              |        |
|--------------|------------------------|---------------|----------------------|--------|--------|----------------|-------|--------------|--------|
| Operator:    | OCCIDENTAL PERMIAN LTD | P.O. Box 4294 | Houston, TX772104294 | OGRID: | 157984 | Action Number: | 17218 | Action Type: | C-103Z |
| OCD Reviewer | Condition              |               |                      |        |        |                |       |              |        |
| ksimmons     | None                   |               |                      |        |        |                |       |              |        |