

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

WELL API NO. 30-025-07602
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19552
7. Lease Name or Unit Agreement Name South Hobbs G/SA Unit
8. Well Number 44
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; Grayburg - San Andres

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned	
2. Name of Operator OCCIDENTAL PERMIAN LTD	
3. Address of Operator P.O. Box 4294, Houston, TX 77210	
4. Well Location Unit Letter J : 2310 feet from the SOUTH line and 1650 feet from the EAST line Section 4 Township 19S Range 38E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3611' GL	

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

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

Occidental Permian Ltd. respectfully requests a five-year Temporary Abandon Status Extension from the current TA expiration date of 11/2/2020. MIT/BHT attached.

Date of test: 2/10/2022

Pressure readings: Initial - 540 PSI Ending - 540 PSI

Length of test: 32 mins.

Witnessed: Gary Robinson NMOCD

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 2/10/25

Well needs to be PLUGGED OR RETURNED to PRODUCTION

BY THE DATE STATED ABOVE: X 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 Roni Mathew TITLE Regulatory Analyst, Sr. DATE 2/17/2022

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 5/20/22
 Conditions of Approval:

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 OCCIDENTAL PERMIAN LTD		API Number 30-025-07602	
Property Name SOUTH HOBBS G/SA UNIT		Well No. #044	

2. Surface Location

UL - Lot J	Section 4	Township 19S	Range 38E	Feet from 2310	N/S Line S	Feet From 1650	E/W Line E	County LEA
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Well Status

YES <input checked="" type="checkbox"/> TA'D WELL	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> SHUT-IN	NO <input type="checkbox"/>	INJ	INJECTOR	SWD	OIL <input checked="" type="checkbox"/> PRODUCER	GAS	DATE 2-10-22
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OBSERVED DATA

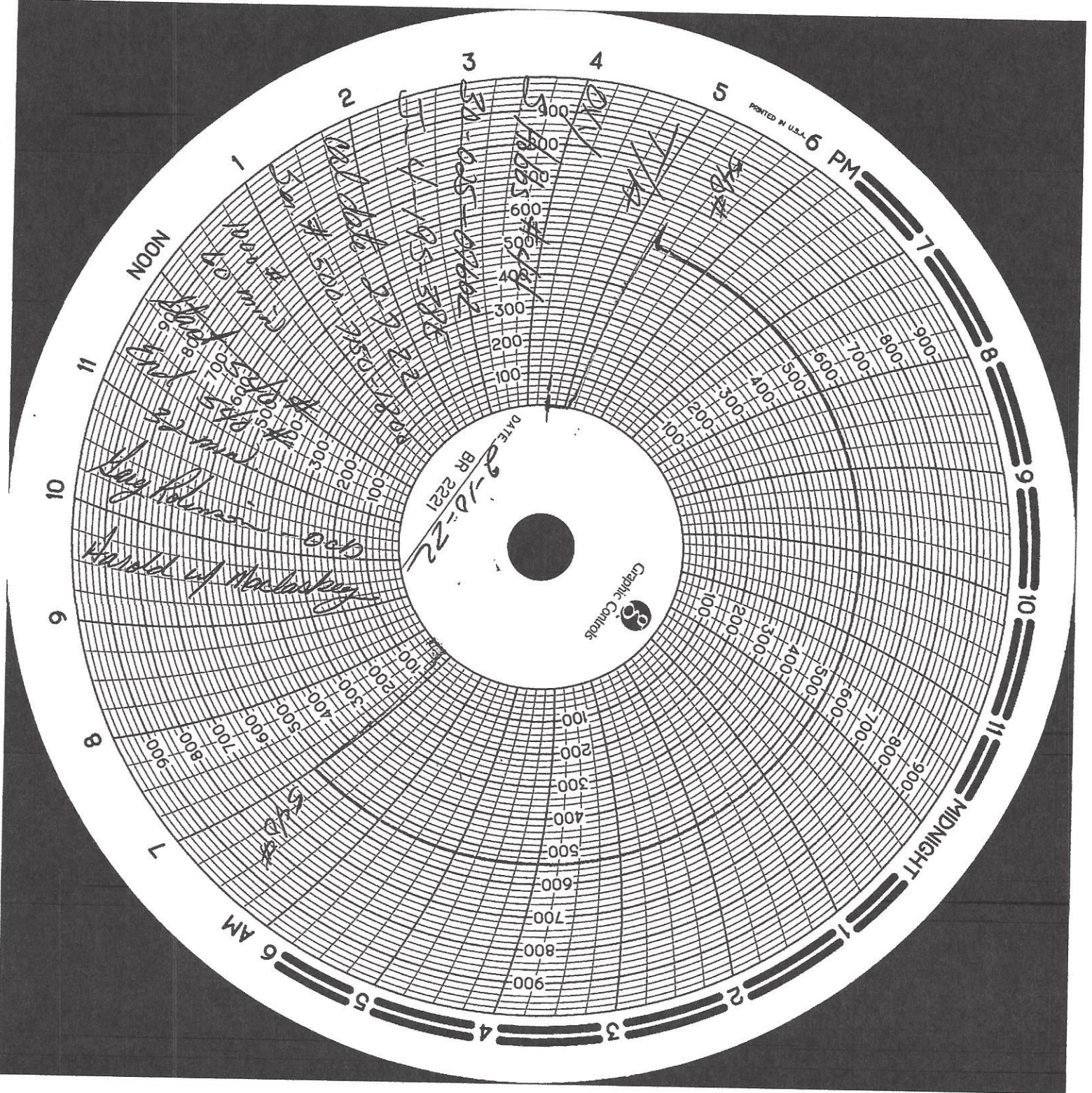
	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0			0	NONE
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR
Surges	Y/N	Y/N	Y/N	Y/N	GAS
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood if
					applies

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

T/A MIT/BAT

Signature: <u>Nicole Nelson</u>		OIL CONSERVATION DIVISION	
Printed name: Nicole Nelson		Entered into RBDMS	
Title: Administrative Assistant		Re-test	
E-mail Address: nicole_nelson2@oxy.com			
Date: 2/16/22	Phone:		
Witness: <u>Shay Robinson</u>			

INSTRUCTIONS ON BACK OF THIS FORM



PERFORMING BRADENHEAD TEST

General Procedure for Bradenhead Test

Identify: All valves prior to testing

Gauges: Install on each casing string to record pressure.

Assure: That all valves are in good working condition and closed at least 24 hours prior to testing.

Open: Each valve (Bradenhead, intermediate and casing valves) is to be opened separately.

Check Gauges: Record pressure on each gauge and casing string on BHT form. Open valves to atmosphere and record results on BHT form.

Designate what applies to the result of opening the valves for each string:

- | | |
|------------------------|-----------|
| • Blow or Puff | Yes or No |
| • Bled down to Nothing | Yes or No |
| • Steady Flow | Yes or No |
| • Oil or Gas | Yes or No |
| • Water | Yes or No |

Start: Injection or SWD pump so tubing pressure can be read.

Instructions below apply to the District 1 Hobbs office since this must be reported on a form.

In case of pressure:

1. Record pressure reading on gauge.
2. Bleed and note time elapsed to bleed down.
3. Leave valve open for additional observation.
4. Note any fluids expelled.

In absence of Pressure:

1. Leave valve open for additional observation.
2. Note types of fluids expelled.
3. Note if fluids persist throughout test.

Note: Tubing pressure on injection or SWD wells.

Test will be signed by person performing test with a contact phone number.

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COMMENTS

Action 82374

COMMENTS

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 82374
	Action Type: [C-103] Sub. General Sundry (C-103Z)

COMMENTS

Created By	Comment	Comment Date
plmartinez	DATA ENTRY T/A PM	5/23/2022

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Created By	Condition	Condition Date
kfortner	None	5/20/2022