

**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>30-025-07603</b>
Property Name <b>SOUTH HOBBS G/SA UNIT</b>	Well No. <b>20</b>

**Surface Location**

UL -Lot	Section	Township	Range	Feet From	N/S Line	Feet From	E/W Line	County
	3	19S	38E	660	N	660	W	LEA

**Well Status**

TA'D Well	SHUT-IN	INJECTOR	PRODUCING	DATE
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	INJ SWD	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	04-10-2023

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)Internm-Prod	(D)Prod Csng	(E)Tubing
Pressure	0	0	NA	386	409
<b>Flow Characteristics</b>			Z		
Puff	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	CO <sub>2</sub> _____
Steady Flow	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	WTR _____
Surges	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	GAS _____
Down to nothing	<input checked="" type="checkbox"/> Y / N	<input checked="" type="checkbox"/> Y / N	<input checked="" type="checkbox"/> Y / N	Y / N	Type of Fluid _____
Gas or Oil	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Injected for _____
Water	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Water Flood if applies _____

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

Surface and Interm 2 had no pressure Bled to 0

Mevin Whitaker 915-630-6358 DANOS

Signature: <i>Brian Bayer</i>	OIL CONSEVATION DIVISION
Printed name: Brian Bayer	Entered into RBDMS
Title: Well Surveillance Lead	Re-test
E-mail Address: <a href="mailto:brian_bayer@oxy.com">brian_bayer@oxy.com</a>	
Date:	Phone: 432.758.6701
Witness:	

**District I**  
 1625 N. French Dr., Hobbs, NM 88240  
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**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 224821

**CONDITIONS**

Operator: OCCIDENTAL PERMIAN LTD P.O. Box 4294 Houston, TX 772104294	OGRID: 157984
	Action Number: 224821
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

**CONDITIONS**

Created By	Condition	Condition Date
kfortner	None	5/28/2024