

JUN 18 2015

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

RECEIVED

BRADENHEAD TEST REPORT

|                                          |                            |
|------------------------------------------|----------------------------|
| Operator Name<br>OCCIDENTAL PERMIAN, LTD | API Number<br>30-025-26973 |
| Property Name<br>NORTH HOBBS (G/SA) UNIT | Well No.<br>323G           |

7. Surface Location

|               |               |                  |               |                   |                   |                   |                  |               |
|---------------|---------------|------------------|---------------|-------------------|-------------------|-------------------|------------------|---------------|
| UL - Lot<br>G | Section<br>32 | Township<br>18-S | Range<br>38-E | Feet from<br>1370 | N/S Line<br>NORTH | Feet From<br>1400 | E/W Line<br>EAST | County<br>LEA |
|---------------|---------------|------------------|---------------|-------------------|-------------------|-------------------|------------------|---------------|

Well Status

|                                                      |                                                    |                                                                            |                                           |                  |
|------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------|------------------|
| TA'D WELL<br>YES <input checked="" type="radio"/> NO | SHUT-IN<br>YES <input checked="" type="radio"/> NO | INJECTOR<br><input checked="" type="radio"/> INJ <input type="radio"/> SWD | PRODUCER<br>OIL <input type="radio"/> GAS | DATE<br>6-2-2015 |
|------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------|------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg                        | (E)Tubing                                                                                               |
|----------------------|------------|--------------|--------------|------------------------------------|---------------------------------------------------------------------------------------------------------|
| Pressure             | 0          | N/A          | N/A          | 1419                               | 901                                                                                                     |
| Flow Characteristics |            |              |              |                                    |                                                                                                         |
| Puff                 | Y / N      | Y / N        | Y / N        | Y / N                              | CO2 <input type="checkbox"/><br>WTR <input checked="" type="checkbox"/><br>GAS <input type="checkbox"/> |
| Steady Flow          | Y / N      | Y / N        | Y / N        | Y / N                              | Type of Fluid<br>Injected for<br>Waterflood if<br>applies                                               |
| Surges               | Y / N      | Y / N        | Y / N        | Y / N                              |                                                                                                         |
| Down to nothing      | Y / N      | Y / N        | Y / N        | <input checked="" type="radio"/> N |                                                                                                         |
| Gas or Oil           | Y / N      | Y / N        | Y / N        | Y / N                              |                                                                                                         |
| Water                | Y / N      | Y / N        | Y / N        | Y / N                              |                                                                                                         |

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

Prod. casing to zero 5 sec.

BB 6/25/15

|                                                  |                           |
|--------------------------------------------------|---------------------------|
| Signature: <i>Jessie Shaffer</i> 806-215-0115    | OIL CONSERVATION DIVISION |
| Printed name: MENDY JOHNSON <i>Mendy Johnson</i> | Entered into RBDMS        |
| Title: ADMINISTRATIVE ASSOCIATE                  | Re-test                   |
| E-mail Address: mendy_johnson@oxy.com            |                           |
| Date: JUN 15 2015                                |                           |
| Phone: 806-592-6280                              |                           |
| Witness:                                         |                           |

INSTRUCTIONS ON BACK OF THIS FORM

JUL 01 2015