

JUN 18 2015

RECEIVED

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 30-025-28887
Property Name NORTH HOBBS (G/SA) UNIT	Well No. 422

7. Surface Location

UL - Lot H	Section 31	Township 18-S	Range 38-E	Feet from 2259	N/S Line NORTH	Feet From 600	E/W Line EAST	County LEA
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Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	YES	SHUT-IN <input checked="" type="radio"/> NO	INJ	INJECTOR SWD	<input checked="" type="radio"/> OIL	PRODUCER GAS	DATE 5-13-15
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	N/A	N/A	390	400 410
Flow Characteristics	Puff				
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	CO2 ___
Steady Flow	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	WTR ___
Surges	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	GAS ___
Down to nothing	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	Type of Fluid Injected for Waterflood if applies
Gas or Oil	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	
Water	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	

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

Sur face puff to 0 pct

Jared Tucker

BS 6/26/15

Jared Tucker 575-499-4992

Signature: <i>Mendy Johnson</i>	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON	Entered into RBDMS
Title: ADMINISTRATIVE ASSOCIATE	Re-test
E-mail Address: mendy_johnson@oxy.com	
Date: JUN 16 2015	Phone: 806-592-6280
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

JUL 02 2015

[Handwritten signature]