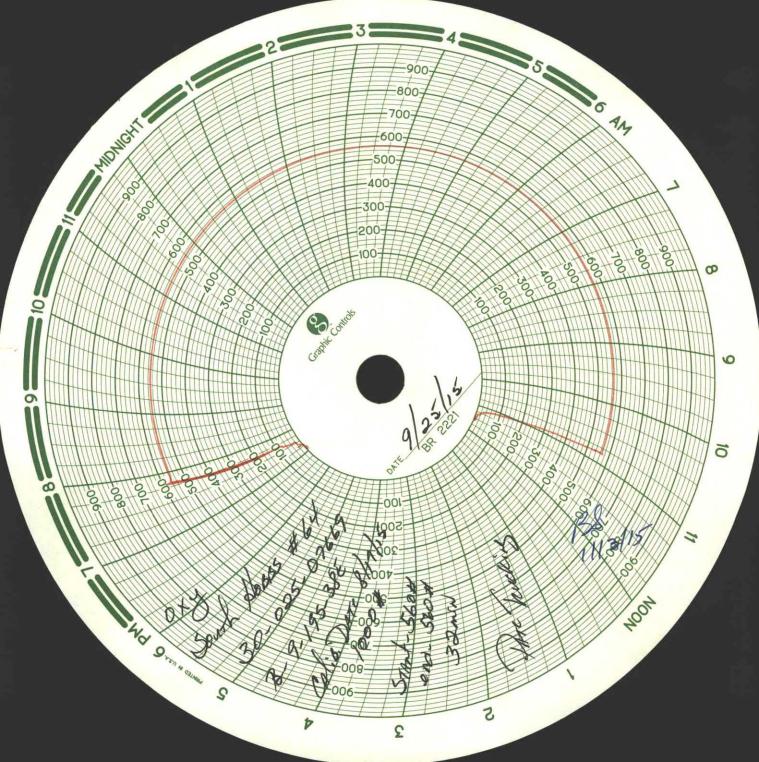
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 5-27-2004

FILE IN TRIPLICATE	OIL CONSERVATION DIVISIONC	D		
DISTRICT I 1625 N. French Dr. , Hobbs, NM 88240	1220 South St. Francis Dr. Santa Fe, NM 87505	WELL API NO. 30-025-07669		
DISTRICT II	NOV 0 3 2	Indicate Type of Lease		
1301 W. Grand Ave, Artesia, NM 88210	110	STATE X FEE		
DISTRICT III	RECEIVE	6. State Oil & Gas Lease No.		
1000 Rio Brazos Rd, Aztec, NM 87410	OTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PI	South Hobbs (G/SA) Unit			
	APPLICATION FOR PERMIT" (Form C-101) for such proposals.)	South Hoods (O/SA) Olit		
Type of Well: Oil Well	Gas Well Other Injector	8. Well No. 64		
2. Name of Operator		9. OGRID No. 157984		
Occidental Permian Ltd.				
3. Address of Operator HCR 1 Box 90 Denver City, TX	(70323	10. Pool name or Wildcat Hobbs (G/SA)		
4. Well Location	1 17323			
Unit Letter B : 660	Feet From The North Line and 1980 Fee	et From The East Line		
Section 9	Township 19-S Range 38-1 11. Elevation (Show whether DF, RKB, RT GR, etc.)	E NMPM Lea County		
	3606' KB			
Pit or Palous grade Tonk Application	or Closure			
Pit or Below-grade Tank Application	or Closure	Distance from a second surface control		
	d Water Distance from nearest fresh water well			
Pit Liner Thickness mil	Below-Grade Tank: Volumebbls; Construction Ma	aterial		
12. Chec NOTICE OF INT	k Appropriate Box to Indicate Nature of Notice, Report, or ENTION TO:	Other Data SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OP	PNS. PLUG & ABANDONMENT		
PULL OR ALTER CASING	Multiple Completion CASING TEST AND CEMEN	NT JOB		
OTHER:	OTHER: Casing Integ	prity Test X		
12 Describe Proposed or Completed Or	perations (Clearly state all pertinent details, and give pertinent dates			
	For Multiple Completions: Attach wellbore diagram of proposed			
Date of Test: 09/25/2015				
Date of Test. Oxizorzoto				
Pressure Readings: Initial – 560 PSI	Ending – 560 PSI			
Length of test: 32 minutes				
Witnessed: Yes - George Bowers w/l	NMOCD			
		2 /2: MIT		
	true and complete to the best of my knowledge and belief. I further certify	that any pit or below-grade tank has been/will be		
constructed or closed according to NMOCD guidelines		ve OCD-approved		
SIGNATURE Mend	y Cooking plan TITLE Administrative	Associate DATE 10/29/2015		
TYPE OR PRINT NAME Mendy A.	olnson E-mail address: mendy_johnson@oxy.com	1 TELEPHONE NO. 806-592-6280		
For State Use Only	0			
APPROVED BY	Somanal TITLE Stat	4 Manager DATE 11/3/15		
CONDITIONS OF APPROVAL IF ANY	7.00	- / //		

NOV 0 4 2015

ga



American Valve & Meter, Inc.

1113 W. BROADWAY P.O. BOX 166 HOBBS, NM 88240

TO: Pate Trucking		DATE: 8.17-15				
This is to	certify that:	0		¥		
I, Tony Flores			, Technician for American Valve & Meter,			
			e following instrumen			
8" pressure recorder			Serial No: _/25/7			
at these p						
Pressure 0-1000#		Temperature				
Test	Found	Left	Test	Found	Left	
0	-	0			_	
500		500	· 4 . /	_ /		
200		700	-			
1000	-	1000	4			
200	-	200			-	
0	-	0	4-4			
Remark	'S:		~			
				11		

Signature Jony Sloves