

**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 30-025-05491
Property Name NORTH HOBBS (G/SA) UNIT	Well No. 111

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
D	25	18-S	37-E	660	NORTH	660	WEST	LEA

Well Status

TA'D WELL	SHUT-IN	INJECTOR	SWD	PRODUCER	GAS	DATE
YES <input type="radio"/> NO <input checked="" type="radio"/>	YES <input type="radio"/> NO <input checked="" type="radio"/>	<input checked="" type="radio"/> NO <input type="radio"/>		OIL <input type="radio"/> GAS <input type="radio"/>		3/29/16

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	1060
Flow Characteristics					
Puff	<i>0/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>0/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/0</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/0</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/0</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/0</i>	GAS <input type="checkbox"/>
Down to nothing	<i>0/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>0/N</i>	Type of Fluid
Gas or Oil	<i>Y/0</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/0</i>	Injected for
Water	<i>Y/0</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/0</i>	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.

(A) puff to zero in less than 3 sec.
(D) puff to zero in less than 3 sec.
Donald Higgins 575-631-9886

PS 4-29-16

Signature: <i>Mendy Johnson</i>	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON	Entered into RBDMS <i>CB</i>
Title: ADMINISTRATIVE ASSOCIATE	Re-test
E-mail Address: mendy_johnson@oxy.com	
Date: APR 26 2016	Phone: 806-592-6280
Witness:	