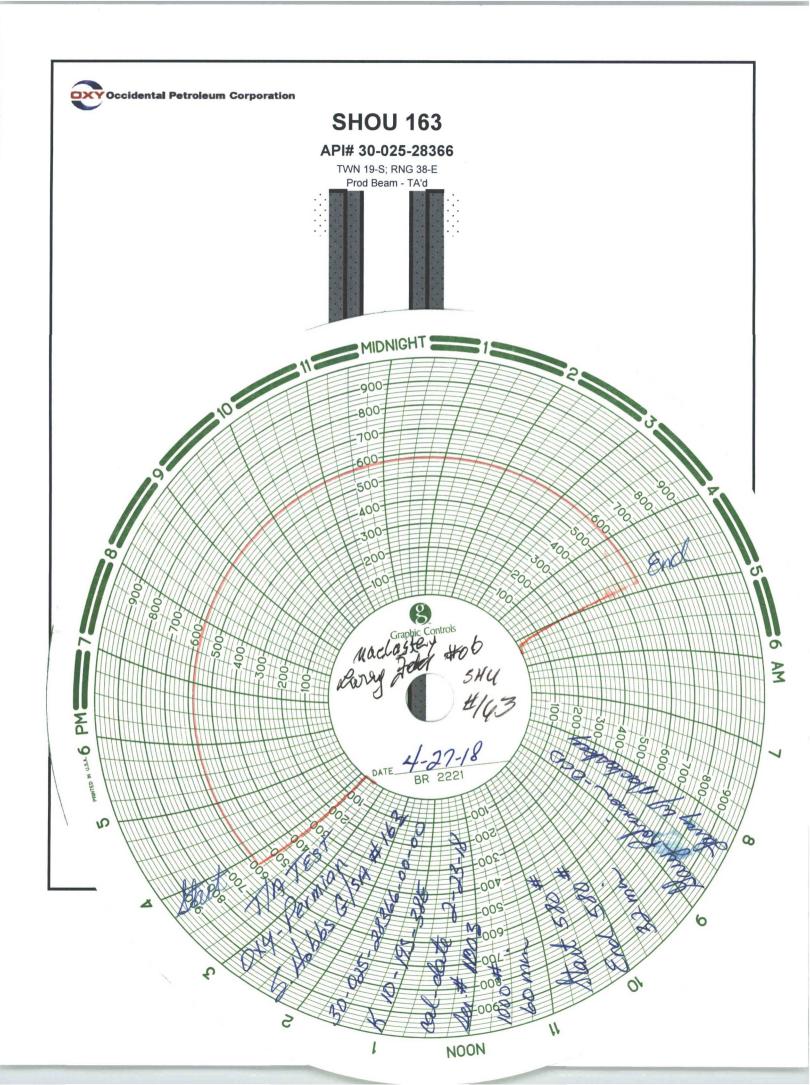
| Submit 1 Copy To Appropriate District Office | State of New Me | | | Form C-103 | | |
|--|--|----------------------|------------------------------|-----------------------|--|--|
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natu | iral Resources | WELL API NO. | Revised July 18, 2013 | | |
| District II - (575) 748-1283 | OIL CONSERVATION | DIVISION | 30-025-28366 | | | |
| 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 | 1220 South St. Fran | | 5. Indicate Type of L | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87 | | 6. State Oil & Gas Le | | | |
| District IV – (505) 476-3460 1220 S. St. Francis Dr., Sans he, NM | • | | o. State on & Gas E | Just 110. | | |
| 87505 | ES AND REPORTS ON WELLS | | 7. Lease Name or Un | it Agreement Name | | |
| (DO NOT USE THIS FORM FOR PROPOSA | S TO DRILL OR TO DEEPEN OR PL | UG BACK TO A | | | | |
| DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.) | TION FOR PERMIT" (FORM C-101) FO | OR SUCH | South Hobbs (| | | |
| 1. Type of Well: Oil Well G | 8. Well Number 163 | | | | | |
| Name of Operator Occidental Permian, Ltd | | | 9. OGRID Number | 157984 | | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | | | |
| HCR 1 Box 90 Denver City, | TX 79323 | | Hobbs (G/SA) | | | |
| 4. Well Location | 2475 c. c | 2/ | 175 | Most | | |
| | feet from the South | | 30 NOR 19 NOR 1 | (| | |
| | Township 19-S Ra 11. Elevation (Show whether DR. | ange 38-E | | ounty | | |
| | 3600' GL | , KKD, KI, OK, etc.) | | | | |
| | | | | | | |
| 12. Check Ap | propriate Box to Indicate N | ature of Notice, | Report or Other Da | ta | | |
| NOTICE OF INT | ENTION TO: | SUBS | SEQUENT REPO | RT OF: | | |
| | | | | | | |
| | CHANGE PLANS | COMMENCE DRII | | AND A | | |
| | MULTIPLE COMPL | CASING/CEMENT | JOB | | | |
| DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM | | | | | | |
| OTHER: | | OTHER: Casing inte | egrity test/TA status extens | ion request | | |
| Describe proposed or complet | | | | | | |
| of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of | | | | | | |
| proposed completion or recompletion. | | | | | | |
| Date of test: 04/27/2018 Pressure readings: Initial - 580 PSI Ending - 580 PSI This Approval of Temporary | | | | | | |
| Length of test: 32 minutes Abandonment Expires 4/21/2019 | | | | | | |
| Witnessed: Yes - Gary Robinson - OCD | | | | | | |
| The SULL 162 is part of an uncoming conital CO2 expansion project in the South Habba Unit. The well | | | | | | |
| The SHU 163 is part of an upcoming capital CO2 expansion project in the South Hobbs Unit. The well will be converted to an CO2 producer. AFE is approved and work will commence Q3 2018. | | | | | | |
| will be converted to an CO2 producer. At E is approved and work will commence Q3 2010. | | | | | | |
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| | | | | | | |
| Spud Date: | Rig Release Da | ite: | | | | |
| | | | | | | |
| I hereby certify that the information about | ove is true and complete to the be | est of my knowledge | and belief. | | | |
| m. 1000 | 0 | | | | | |
| SIGNATURELLA U | TITLE Admin | n. Associate | DATE | 05/03/2018 | | |
| Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280 | | | | | | |
| For State Use Only | | | | | | |
| APPROVED BY: Y CALLED SIGNAL TITLE AD/II DATE 5/7/2018 | | | | | | |
| Conditions of Approval (if any): | | | | | | |
| U | | | | | | |

RBOMS - CHART - W



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

BRADENHEAD TEST REPORT

| Operator Name OCCIDENTAL PERMIAN, LTD | | | | | | ³ API Number 30-025-28366 | | | | | |
|---|---|------------------|----------------------|------------------------------|----------------|---|------------------|----------------|-----------|----------|-----------|
| Property Name SOUTH HOBBS (G/SA) UNIT | | | | | | Well No. 163 | | | | | |
| 7. Surface Location | | | | | | | | | | | |
| UL - Lot K | Section 10 | Township 19-S | Range 38-E | Feet from N/S Line Feet From | | t From | E/W Line WEST | County LEA | | | |
| | | | | , | Well Status | | | | | | |
| Well | Status | | SHUT-IN | | PRODUCING | | | DAT | E | | |
| OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUAL | | | | | 9 | V FOR | 118 | ES EA CH | | | |
| | OPE | N BRADEN | HEAD AND IN I | | SERVED DA' | | VIDUALL | YFOR | 15 MINUTI | ES EACH | |
| If bradenhead | flowed wa | ter, check al | l of the description | is that apply: | SERVED DA | IA | | | | | |
| | | (A)S | urf-Interm | (B)Interm(1)- | Interm(2) | (C)Inte | rm-Prod | | (D)Proc | Csng | (E)Tubing |
| Pressure | | | MA | N | A | | NA | | | | NONE |
| Flow Charac | | | 7. | / | | | | | | | |
| | Puff Y/N Y/N | | | | Y / N | | | Y/N | | | |
| Steady F | | | | | Y / N | | | Y / N Y / N | | | |
| Surge: | | | Y/N Y/N Y/N Y/N | | Y / N Y / N | | | Y / N | _ | | |
| Gas or (| _ | | Y / N | | | Y / N | | Y/N | | - | |
| Water | | _ | Y / N | | / N | | Y / N | | Y/N | | - |
| | | | | | | | | | | | J |
| If bradenhead | If bradenhead flowed water, check all of the descriptions that apply: | | | | | | | | | | |
| CLEAR | CLEAR FRESH SALTY S | | | SULFU | FUR BLACK | | | | | | |
| Remarks: | | | | | | INTECT | ING AT TI | UIS TIX | 1E W1 | TR, GAS, | CO2 |
| Kemai ks. | | | | | | HOLCI | ing AT II | 1115 1111 | ILW | N,OAS,_ | |
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| | | | | | | | | | | | |
| Signature: Mendy a Johnson | | | | OIL CONSERVATION DIVISION | | | | | | | |
| Printed name: MENDY JOHNSON | | | | Entered into RBDMS | | | | | | | |
| Title: ADMINISTRATIVE ASSOCIATE | | | | Re-test | | | | | | | |
| E-mail Addre | ss: mendy | johnson@o | xy.com | | | | | | | | |
| Date: 5 3 20 18 Phone: 806-592/1/280 | | | | | | | | | | | |
| Witness: Lave Kolenson | | | | | | | | | | | |
| | | | | 1 | | | - | | | | |

MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBES,N.M. 88240 505-395-1016

| THIS IS TO CERTIFY | THAT: | DATE 2-23-1 |
|--|---------------------|---|
| L Albert Rodrigue? M SERVICES, INC. HAS CHE INSTRUMENT. | CKED THE CALIBRATIO | |
| | | SERIAL NUMBE |
| * | | 100 3 |
| TESTED AT THESE PRESSURE SOC TEST AS FOUND COR 0 //0 200 200 300 200 300 100 500 | | AS FOUND CORRECT 600 900 900 900 700 000 000 000 |
| REMARKS: | | |
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SIGNED: Flelt Rodey