

Submit 1 Copy To Appropriate District Office
District I - (575) 748-6184
1625 N. French Dr., Hobbs, NM 88242
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87402
District IV - (505) 476-3482
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-28414
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Injector		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Occidental Permian, Ltd		6. State Oil & Gas Lease No.
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323		7. Lease Name or Unit Agreement Name North Hobbs (G/SA) Unit
4. Well Location Unit Letter <u>A</u> : <u>1200</u> feet from the <u>North</u> line and <u>206</u> feet from the <u>East</u> line Section <u>24</u> Township <u>18-S</u> Range <u>37-E</u> NMPM <u>Lea</u> County		8. Well Number <u>413</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3663' GL		9. OGRID Number <u>157984</u>
		10. Pool name or Wildcat Hobbs (G/SA)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Casing integrity test <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date 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: 06/26/2018
Pressure readings: Initial - 520 PSI Ending - 520 PSI
Length of test: 32 minutes
Witnessed: Yes - Gary Robinson - OCD

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mendy A. Johnson TITLE Admin. Associate DATE 07/06/2018

Type or print name Mendy A. Johnson E-mail address: mendy_johnson@oxy.com PHONE: 806-592-6280

For State Use Only

APPROVED BY: Gary Robinson TITLE Conservation Officer DATE 7-18-18

Conditions of Approval (if any):

HOBBS OCD

JUL 09 2018

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 30-025-28414
Property Name NORTH HOBBS (G/SA) UNIT	Well No. 413

7. Surface Location

UL - Lot A	Section 24	Township 18-S	Range 37-E	Feet from 1200	N/S Line NORTH	Feet From 206	E/W Line EAST	County LEA
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Well Status

Well Status ACTIVE	SHOT-IN Active Inj	PRODUCING NJS	DATE 6-26-18	Wag injected on water
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Casing	(E)Tubing
Pressure	0	0	N/A	47	1075
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	Y/N
Steady Flow	Y/N	Y/N	Y/N	Y/N	Y/N
Surges	Y/N	Y/N	Y/N	Y/N	Y/N
Down to nothing	Y/N	Y/N	Y/N	Y/N	Y/N
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Y/N
Water	Y/N	Y/N	Y/N	Y/N	Y/N

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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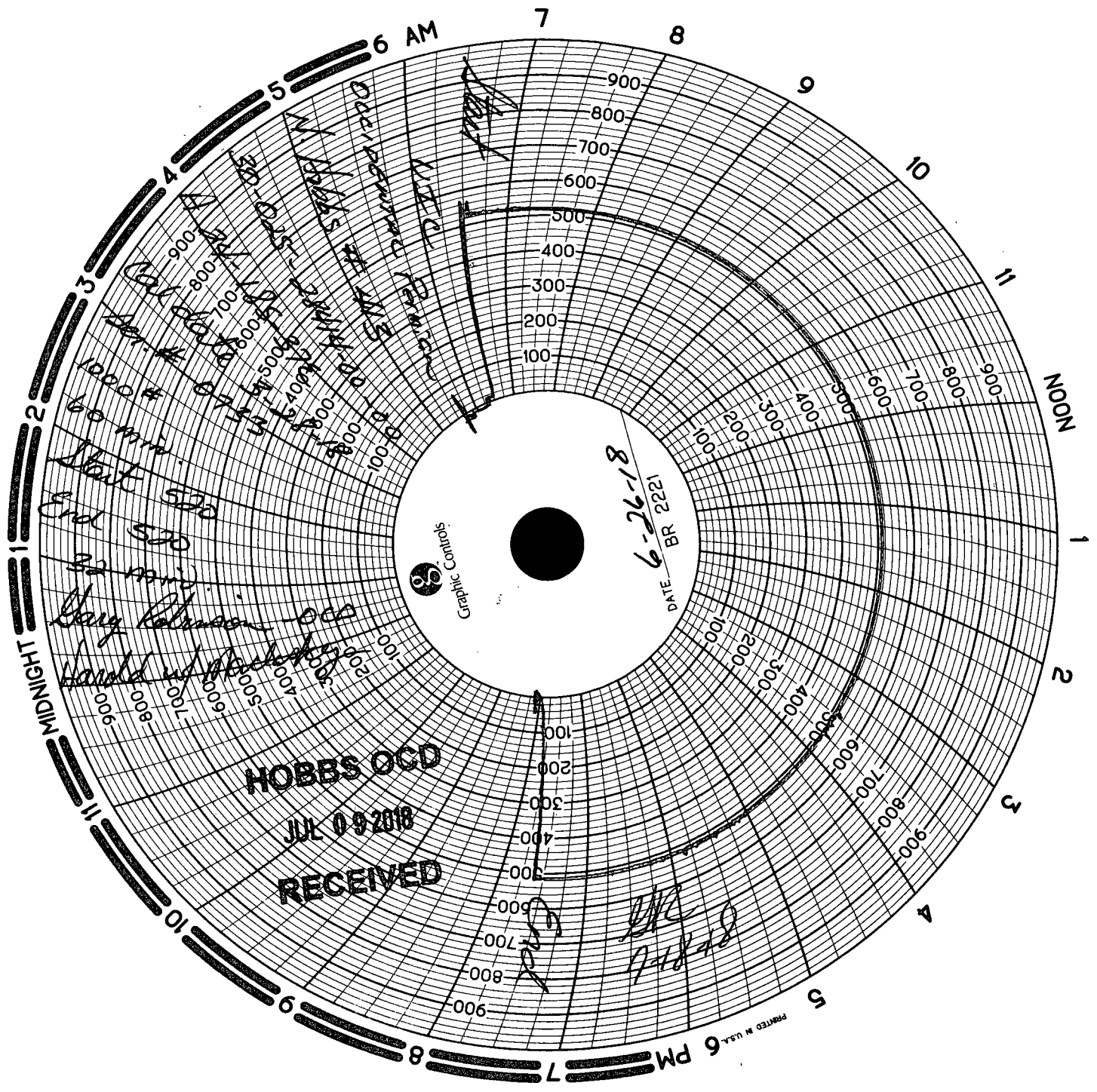
Remarks: INJECTING AT THIS TIME ___ WTR, ___ GAS, ___ CO2

No threads in prod. csq. valve. 6-25-18

DK

Valve replaced 6-25-18

Signature: <i>Mendy Johnson</i>	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON	Entered into RBDMS
Title: ADMINISTRATIVE ASSOCIATE	Re-test <i>[Signature]</i>
E-mail Address: mendy_johnson@oxv.com	
Date: 7/6/18	Phone: 806-592-6280
Witness: <i>Gary Johnson</i>	



Graphic Controls

DATE 6-26-18
BR 2221

HOBBS OCD
JUL 09 2018
RECEIVED

6-26-18
JUL 18 2018

MACLASKEY OILFIELD SERVICES

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

THIS IS TO CERTIFY THAT:

DATE: 2-23-18

I, Albert Rodriguez METER TECHNICIAN FOR MACLASKEY OILFIELD
SERVICES, INC. HAS CHECKED THE CALIBRATION ON THE FOLLOWING
INSTRUMENT. 1000 PRESSURE RECORDER

SERIAL NUMBER

1003

TESTED AT THESE POINTS.

PRESSURE <u>500</u>		
TEST	AS FOUND	CORRECTED
<u>0</u>	<u>110</u>	<u>✓</u>
<u>110</u>	<u>200</u>	<u>✓</u>
<u>200</u>	<u>300</u>	<u>✓</u>
<u>300</u>	<u>400</u>	<u>✓</u>
<u>400</u>	<u>500</u>	<u>✓</u>

PRESSURE <u>1000</u>		
TEST	AS FOUND	CORRECT
<u>500</u>	<u>600</u>	<u>✓</u>
<u>600</u>	<u>700</u>	<u>✓</u>
<u>700</u>	<u>800</u>	<u>✓</u>
<u>800</u>	<u>900</u>	<u>✓</u>
<u>900</u>	<u>1000</u>	<u>✓</u>

REMARKS:

SIGNED:

Albert Rodriguez