

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1200
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
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

HOBBS OCD
OCT 29 2018
RECEIVED

| |
|---|
| WELL API NO. 30-025- <u>31424</u> |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit |
| 8. Well Number <u>238</u> |
| 9. OGRID Number <u>157984</u> |
| 10. Pool name or Wildcat Hobbs (G/SA) |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3620' KB</u> |

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.)

1. Type of Well: Oil Well Gas Well Other Injector

2. Name of Operator
Occidental Permian, Ltd

3. Address of Operator
HCR 1 Box 90 Denver City, TX 79323

4. Well Location
Unit Letter O : 660 feet from the South line and 2610 feet from the East line
Section 4 Township 19-S Range 38-E NMPM Lea County

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

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

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: 10/17/2018
Pressure readings: Initial - 580 PSI Ending - 580 PSI
Length of test: 32 minutes
Witnessed: Yes - Kerry Fortner - NMOCD

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 10/23/2018

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

APPROVED BY: [Signature] TITLE Compliance Supervisor DATE 11/16/18
Conditions of Approval (if any):

**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 30-025-31424 |
| Property Name SOUTH HOBBS (G/SA) UNIT | Well No. 238 |

7. Surface Location

| | | | | | | | | |
|---------------|--------------|------------------|---------------|------------------|-------------------|-------------------|------------------|---------------|
| UL - Lot O | Section 4 | Township 19-S | Range 38-E | Feet from 660 | N/S Line SOUTH | Feet From 2610 | E/W Line EAST | County LEA |
|---------------|--------------|------------------|---------------|------------------|-------------------|-------------------|------------------|---------------|

Well Status

| | | | | |
|-------------|--------------|------------------|------------------|-----------------------|
| Well Status | SHUT-IN N | PRODUCING INS | DATE 10-17-18 | Water Flood Injection |
|-------------|--------------|------------------|------------------|-----------------------|

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 Csg | (E)Tubing |
|-----------------------------|----------------|------------------------|----------------|-------------|-----------|
| Pressure | 0 | — | — | 0 | 1088 |
| Flow Characteristics | | | | | |
| Puff | 0/N | Y/N | Y/N | 0/N | |
| Steady Flow | Y/0 | Y/N | Y/N | Y/0 | |
| Surges | Y/0 | Y/N | Y/N | Y/0 | |
| Down to nothing | 0/N | Y/N | Y/N | 0/N | |
| Gas or Oil | Y/0 | Y/N | Y/N | Y/0 | |
| Water | Y/0 | Y/N | Y/N | Y/0 | |

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

| | | | | |
|-------|-------|-------|--------|-------|
| CLEAR | FRESH | SALTY | SULFUR | BLACK |
|-------|-------|-------|--------|-------|

Remarks: INJECTING AT THIS TIME WTR, GAS, CO2

MIT/BHT
 (SR) MACKASKAY
 ser# 0733
 cal 9-25-18

| | |
|--|----------------------------|
| 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@oxy.com | |
| Date: 10/23/18 | Phone: 806-592-6280 |
| Witness: Kerry Fortner - OCD 399-3221 | |

MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS, N.M. 83240
505-395-1016

THIS IS TO CERTIFY THAT:

DATE 9-25-18

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

SERIAL NUMBER
95001

TESTED AT THESE POINTS.

| PRESSURE - 500 | | | PRESSURE / 1000 | | |
|----------------|----------|-----------|-----------------|----------|---------|
| TEST | AS FOUND | CORRECTED | TEST | AS FOUND | CORRECT |
| 0 | 100 | ✓ | 500 | 600 | ✓ |
| 100 | 200 | ✓ | 600 | 700 | ✓ |
| 200 | 300 | ✓ | 700 | 800 | ✓ |
| 300 | 400 | ✓ | 800 | 900 | ✓ |
| 400 | 500 | ✓ | 900 | 1000 | ✓ |

REMARKS:

SIGNED: Albert Pedraza