

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3466  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-025-05451 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Temporarily Abandoned		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 2611 State Hwy 214 Denver City, TX 79323		7. Lease Name or Unit Agreement Name North Hobbs (G/SA Unit) ✓
4. Well Location Unit Letter <u>K</u> : <u>1650</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>West</u> line Section <u>14</u> Township <u>18-S</u> Range <u>37-E</u> NMPM Lea County		8. Well Number <u>231</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3686' GL		9. OGRID Number 157984
		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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Casing integrity test/TA status extension request ☒

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: 01/18/2019  
Pressure readings: Initial - 600 PSI Ending - 600 PSI  
Length of test: 32 minutes  
Witnessed: Yes - Gary Robinson - NMOCD

*Jan*  
This Approval of Temporary  
Abandonment Expires 1/18/2020

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 Administrative Associate

DATE 01/22/2019

Type or print name Mendy A. Johnson

E-mail address: mendy\_johnson@oxy.com

PHONE: 806-592-6280

For State Use Only

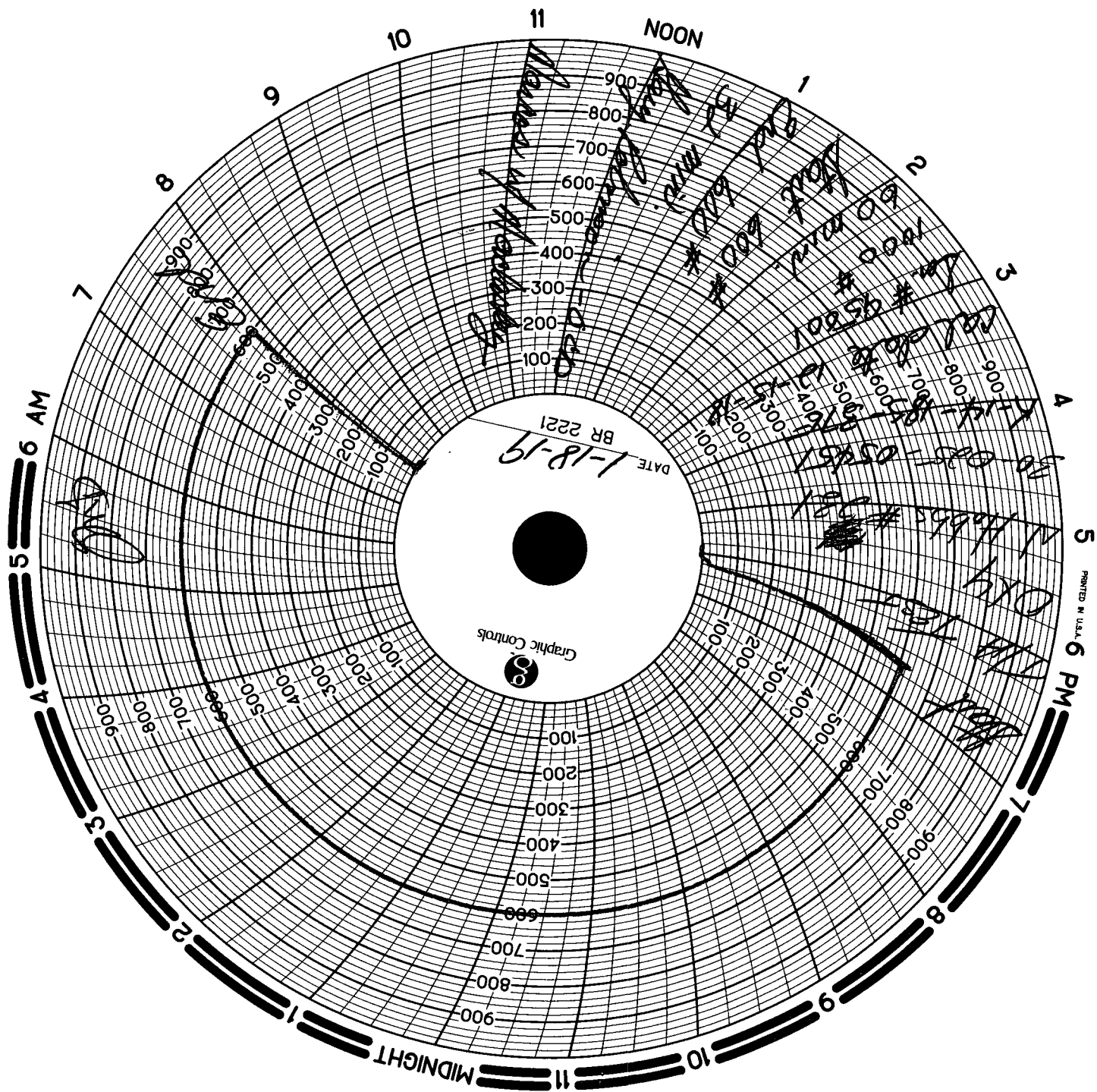
APPROVED BY:

*Gary Robinson*

TITLE Compliance Supervisor

DATE 2/4/2019

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 <i>Oxy</i>	API Number <i>30-025-07510 05451</i>
Property Name <i>North Hobbs Unit</i>	Well No. <i>14-231</i>

Surface Location

UL - Lot <i>16</i>	Section <i>14</i>	Township <i>18S</i>	Range <i>37E</i>	Feet from <i>1650</i>	N/S Line <i>5</i>	Feet From <i>2310</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL <input checked="" type="checkbox"/> YES	NO	SHUT-IN <input checked="" type="checkbox"/> YES	NO	INJECTOR <input checked="" type="checkbox"/> INJ	SWD	OIL PRODUCER <input type="checkbox"/> GAS	DATE <i>1-18-19</i>
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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>	<i>NONE</i>
Flow Characteristics					
Puff	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	WTR <input type="checkbox"/>
Surges	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	GAS <input type="checkbox"/>
Down to nothing	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	Type of Fluid
Gas or Oil	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	Injected for
Water	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	<i>Y / N</i>	<i>Y / N</i>	<i>Y</i> <input checked="" type="checkbox"/> <del>N</del>	Waterflood if

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

*T/A TEST -*

Signature: <i>Mendy Johnson</i>	OIL CONSERVATION DIVISION
Printed name: <i>MENDY JOHNSON</i>	Entered into RBDMS <i>[Signature]</i>
Title: <i>ADMIN. ASSOCIATE</i>	Re-test
E-mail Address: <i>MENDY - JOHNSON @ OXY.COM</i>	
Date: <i>1/22/19</i>	
Phone: <i>804-592-4280</i>	
Witness: <i>Larry Robinson</i>	

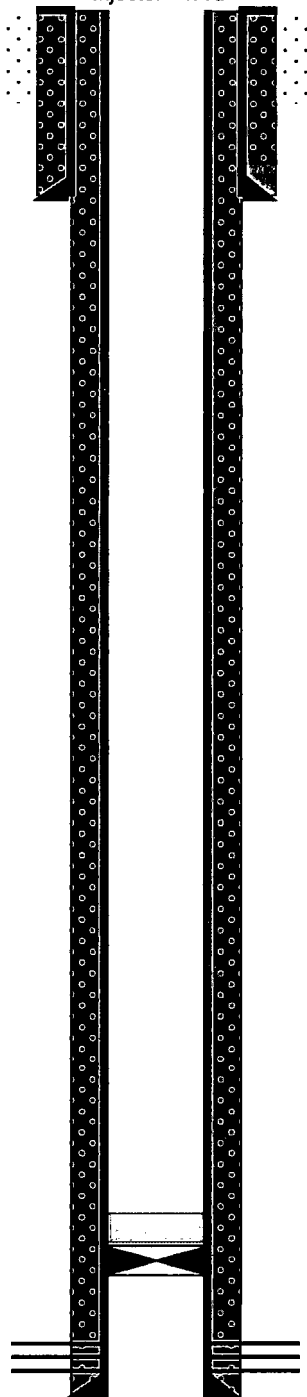
INSTRUCTIONS ON BACK OF THIS FORM

# NHU 14-231

API# 30-025-05451

TWN 18-S; RNG 37-E

Injector - TA'd



8-5/8" 24# @ 262'  
cmt'd w/250 sxs  
TOC @ Surface (Circ.)

Spot 35' on top of CIBP @ 4045'

5-1/2" 14# @ 4249'  
cmt'd w/400 sxs  
TOC @ 2750' (CBL)

Squeezed perfs 4156-4194'  
Plugged Back Perfs: 4235-48'

PBTD @ 4080'  
TD @ 4300'