

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) 334-6100

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

Revised July 18, 2013

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. 30-025-07618
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" 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 South Hobbs (G/SA) Unit
4. Well Location Unit Letter P, 330 feet from the South line and 330 feet from the East line Section 5 Township 19-S Range 38-E NMPM Lea County		8. Well Number 52
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3613' DF		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: 01/29/2019

Pressure readings: Initial - 600 PSI Ending - 600 PSI

Length of test: 30 minutes

Witnessed: Yes - Rick Richman - NMOCD

This Approval of Temporary
Abandonment Expires 1/29/2021

Spud Date:

Rig Release Date:

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

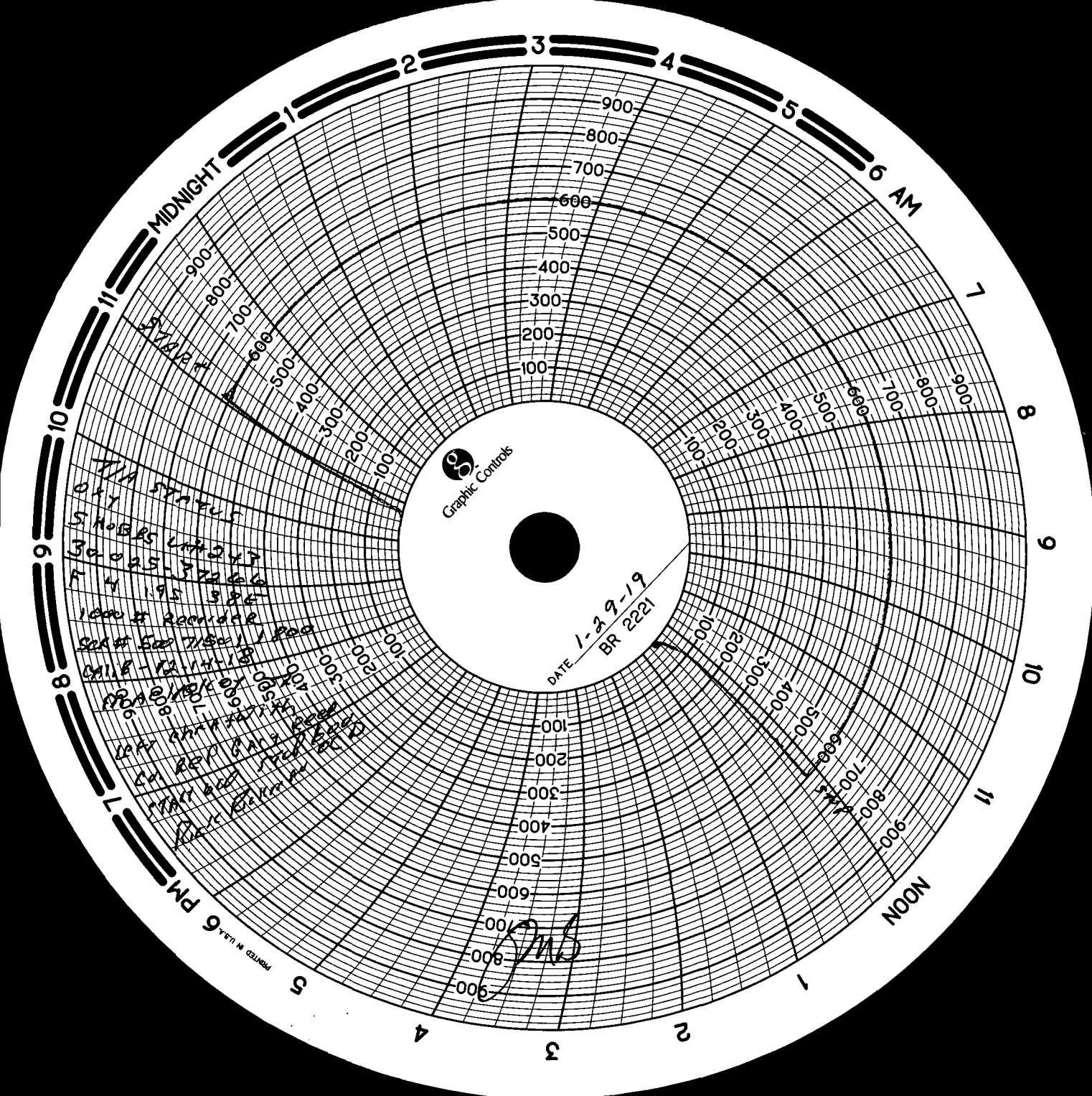
SIGNATURE Mendy A. Johnson TITLE Administrative Associate DATE 01/31/2019

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

For State Use Only

APPROVED BY: George Brown TITLE Compliance Supervisor DATE 2/4/2019

Conditions of Approval (if any):

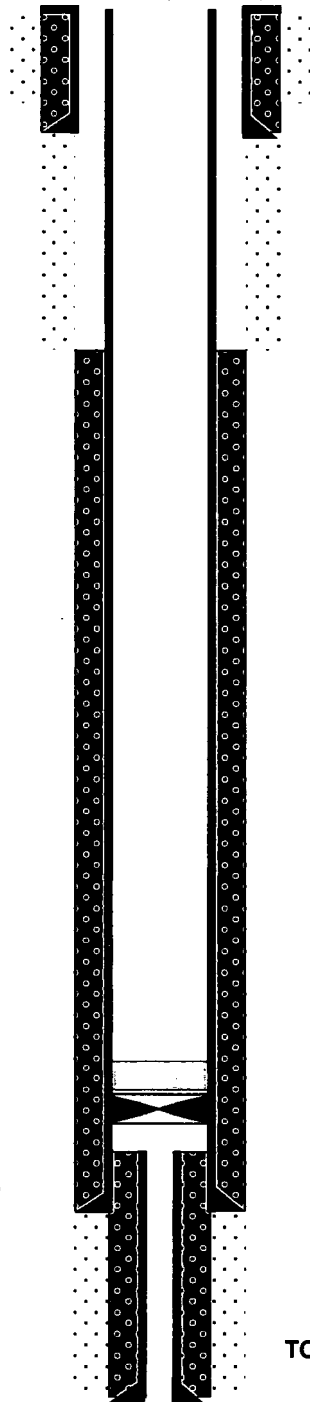


SHU 52

API# 30-025-07618

TWN 19-S; RNG 38-E

Producer Beam - TA'd



13-3/8" 48# @ 259'
cmt'd w/200 sxs
TOC @ Surface (Circ.)

Spot 35' on top of CIBP @ 3780'

Plugged Back perfs: 4100-4280'

5 1/2" 15.5# @ 4109'
cmt'd w/ 150 sxs
TOC @ 3309' (Calc.)

2 7/8" 6.5# @3849-4290'
cmt'd w/ 50sks
TOC @3890'

PBTD @ 3927'
TD @ 4290'

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>30-025-37266</i>
Property Name <i>SOUTH HOBBS UNIT</i>	Well No. <i>243</i>

2. Surface Location

UL - Lot <i>F</i>	Section <i>4</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>1660</i>	N/S Line <i>N</i>	Feet From <i>2106</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

PROD WELL <i>(YES)</i>	NO	SHUT-IN <i>(YES)</i>	NO	INJ	INJECTOR	SWD	PRODUCER <i>(OIL)</i>	GAS	DATE <i>1/29/19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>(X)N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>(Y)N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>(Y)N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</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.

Signature: <i>Mendy Johnson</i>	Date: <i>1/31/19</i>	OIL CONSERVATION DIVISION
Printed name: MENDY JOHNSON		Entered into RBDMS
Title: <i>ADMIN ASSOC.</i>		Re-test
E-mail Address: <i>MENDY - JOHNSON@OXY.COM</i>		
Date: <i>1/29/2019</i>	Phone:	
Witness: <i>[Signature]</i>		

INSTRUCTIONS ON BACK OF THIS FORM