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) 476-3460
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

HOBBS OCD
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Form C-103
Revised July 18, 2013

WELL API NO. 30-25-05599	
5. Indicate Type of Lease STATE ☑ FEE ☐	
6. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☑ Gas Well ☐ Other

7. Lease Name or Unit Agreement Name
East Eumont Unit

8. Well Number 38

2. Name of Operator
OXY USA WTP LP

9. OGRID Number 157984 192463

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

10. Pool name or Wildcat
Eumont Yates SVN RVR QN

4. Well Location
Unit Letter D : 660 feet from the North line and 660 feet from the West line
Section 15   Township 19S   Range 37E   NMPM   County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3668' (KB)

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: Temporarily Abandon ☑

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.

6/3/19 - MIRU x NDWH x NUBOP
6/4/19 - POOH tbg
6/5/19 - RIH 5 1/2" CIBP @ 3720' w/ 25' cmt on top (tag @ 3695').
6/5/19 - Ran MIT chart - Chart attached
6/5/19 - RD x NDBOP x NUWH

FINAL TA STATUS- EXTENSION
Approval of TA EXPIRES: 6-5-23
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: X7

Spud Date: 6/3/19

Rig Release Date: 6/5/19

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

SIGNATURE _____
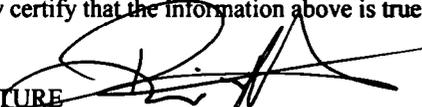
TITLE Regulatory Specialist   DATE 7/9/19

Type or print name Roni Mathew   E-mail address: roni_mathew@oxy.com   PHONE: 713-215-7827

For State Use Only
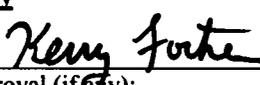
APPROVED BY: Kerry Forte   TITLE Compliance Officer A   DATE 7-17-19
Conditions of Approval (if any):
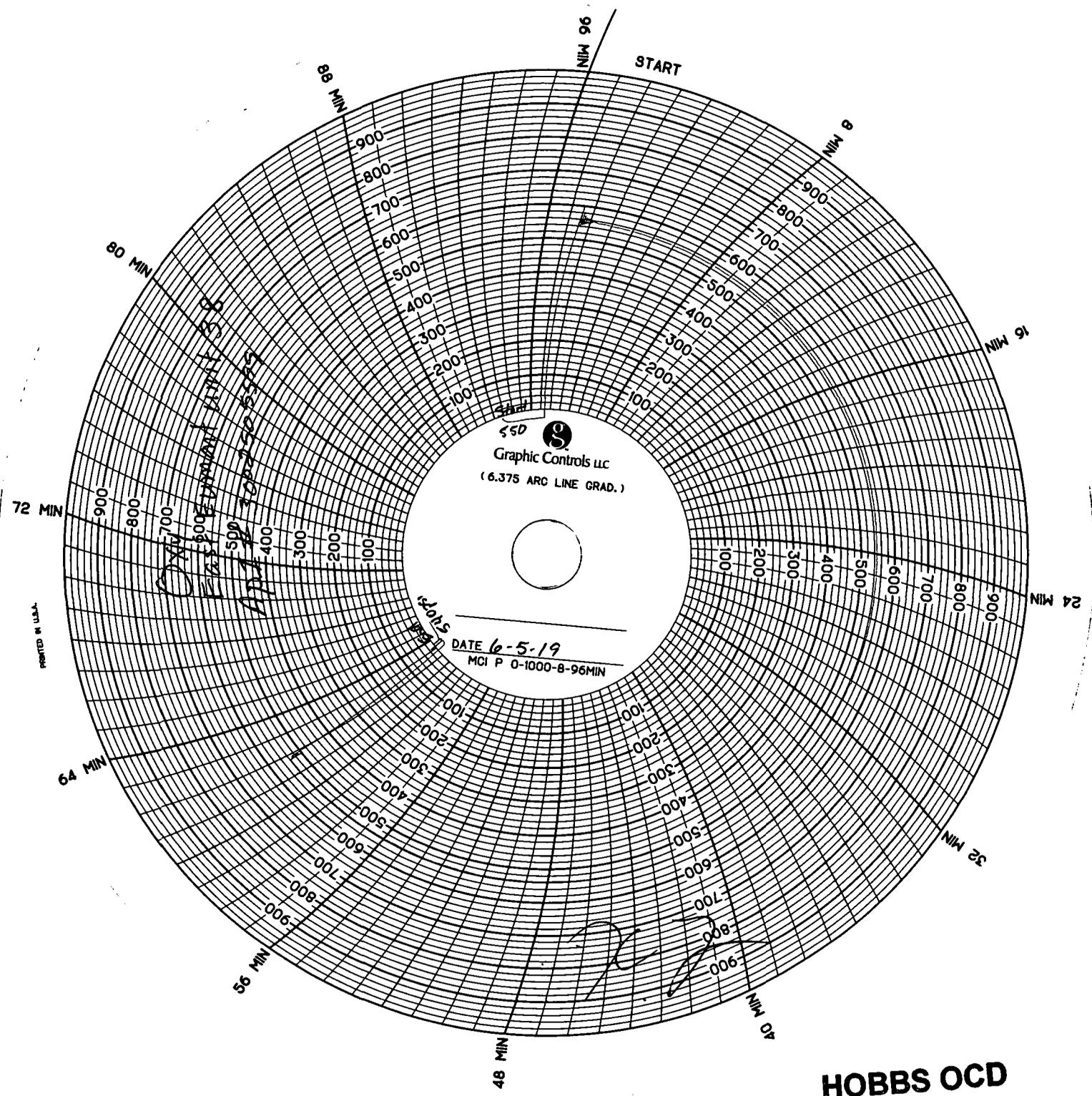
START

96 MIN
88 MIN
80 MIN
72 MIN
64 MIN
56 MIN
48 MIN
40 MIN
32 MIN
24 MIN
16 MIN
8 MIN

Graphic Controls LLC
(6.375 ARC LINE GRAD.)

550

DATE 6-5-19
MCI P 0-1000-8-96MIN

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

BRADENHEAD TEST REPORT

Operator Name		API Number
Occidental Permian LTD		3002505599

Property Name		Well No.
East Eumont		38

¹ Surface Location

UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
	15	19S	37E						Lea

Well Status

TA'D WELL		SHUT-IN		INJECTOR		PRODUCER		DATE
(YES) NO		(YES) NO		INJ SWD		(OIL) GAS		6-5-19

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0				0
Flow Characteristics					
Puff	Y / (N)	Y / N	Y / N	Y / (N)	CO2 __
Steady Flow	Y / (N)	Y / N	Y / N	Y / (N)	WTR __
Surges	Y / (N)	Y / N	Y / N	Y / (N)	GAS __
Down to nothing	(Y) / N	Y / N	Y / N	(Y) / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / (N)	Y / N	Y / N	Y / (N)	
Water	Y / (N)	Y / N	Y / N	Y / (N)	

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

Rev. unit
ser # MFG 2619
Cal : 3-20-19
Start 550psi
End 540psi

Signature: Armando Ontiveros	OIL CONSERVATION DIVISION
Printed name: Armando Ontiveros	Entered into RBDMS
Title: R.U Operator	Re-test
E-mail Address:	
Date: 6-5-19 Phone: 806-332-4837	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM