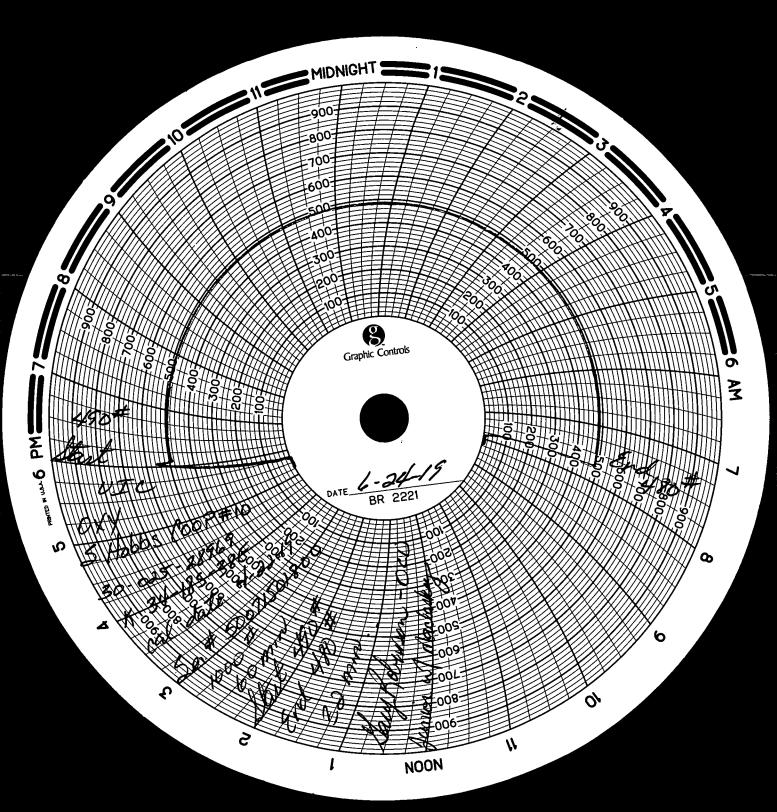
Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, N11 88240		WELL API NO.
<u>District II</u> (575) 748	OIL CONSERVATION DIVISION	30-025-28969 5. Indicate Type of Lease
811 S. First St. (1994, NM 88210) <u>District III - 100</u> 334-6178 1000 Rio Brazos Rd., Azne, 100 87410	1220 South St. Francis Dr.	STATE FEE 🗵
District IV - (505) 13460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV – (505) 143460 1220 S. St. Francis Dr., Santa E. 18 87505		
	CES AND REPORTS ON WELLS GALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIC	CATION FOR PERMIT" (FORM C-101) FOR SUCH	South Hobbs (G/SA) Unit
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🗌 Other Injector	8. Well Number Coop 10
2. Name of Operator		9. OGRID Number 157984
Occidental Permian, Ltd	<b>,</b>	10. Bestmann wildert
3. Address of Operator 1017 West Stanolind Road	Hobbs NM 88240	10. Pool name or Wildcat
4. Well Location		Hobbs (G/SA)
Unit Letter K :	2564 feet from the South line and	1607 feet from the West line
Section 34	Township 18-S Range 38-E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, e	
	3643' KB	
12. Check A	ppropriate Box to Indicate Nature of Notic	e, Report or Other Data
NOTICE OF IN	TENTION TO:   SU	JBSEQUENT REPORT OF:
	PLUG AND ABANDON	
	—	
PULL OR ALTER CASING		
CLOSED-LOOP SYSTEM		
OTHER		sing Integrity Test
	eted operations. (Clearly state all pertinent details, rk). SEE RULE 19.15.7.14 NMAC. For Multiple (	
proposed completion or reco		completions. Attach wendore diagram of
Date of test: 06/24/20	-	
Pressure readings: Ini	tial - 490 PSI Ending - 480 PSI	
Length of test: 32 min Witnessed: Yes - Gary		
Spud Date:	Rig Release Date:	
The share of Calendary in Comparison	- han a star and a second star at a the base of the star at	J
I hereby certify that the information a	above is true and complete to the best of my knowle	age and belief.
//d_/		
SIGNATURE	TITLE Well Surveillance Le	adDATE_07/11/19
Type or print name Justin Saxon	E-mail address: Justin_Saxo	on@oxy.com PHONE: 575-397-8206
Type or print name Justin Saxon For State Use Only		FRUNE, 010-031-0200
In the		
ADDDOLLED DIL MOLAA KAILA		
APPROVED BY:	TITLE Verslaving	DATE 1619
Conditions of Approval (If any):	TITLE Ungland	fin DATE 1/019



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

## **BRADENHEAD TEST REPORT**

	<sup>3</sup> API Number 30-025-28969		Operator Name OCCIDENTAL PERMIAN, LTD						
Well No. COOP 10			Property Name SOUTH HOBBS (G/SA) UNIT						
		· .		ce Location	<sup>7.</sup> Sur				
County LEA		Feet From 1607	/S Line Fe DUTH	Feet from 2564		Range 38-E	Township 18-S	Section 34	UL - Lot K
				l Status	W				
		DATE 24-19	DA			shut-in YES		Status	Well Ac
	EACH	OR 15 MINUTES	VIDUALLY FOR	<b>FMOSPHERE IN</b>	FERMEDIATE TO	HEAD AND INT	N BRADENI	OPE	
				VED DATA		l of the description	ter, check all	flowed wat	<u>lf bradenhead</u>
bing	Sing (E)Tubing	(D)Prod (	erm-Prod	n(2) (C)	(B)Interm(1)-Int	(A)Surf-Interm			
0	) 0		NA		NA	D		A	
-		DR 15 MINUTES	VIDUALLY FOR	IMOSPHERE IN	OBSE ons that apply:	HEAD AND IN	N BRADEN	OPE	

Puff		Y/N	Y/N	YAR
Steady Flow	YA	Y/N	Y/N	YIN
Surges		Y/N	Y/N	
Down to nothing		Y/N	Y/N	
Gas or Oil	Y X	Y/N	Y/N	
Water	Y (N)	Y/N	Y/N	YN

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

CLEAR	FRESH	SALTY	SULFUR	BLACK

INJECTING AT THIS TIME \_\_\_\_WTR, \_\_\_\_GAS, \_\_\_\_CO2

**Remarks**:

UIC Well Shut IN

	OIL CONSERVATION DIVISION		
INSON	Entered into RBDMS	AM /	
ASSOCIATE	Re-test	SP -	
<u>nson@oxy.com</u>			
Phone: 806-592-6280			
Witness: Lary Kolenson			
	ISSOCIATE	NSON Entered into RBDMS ASSOCIATE Re-test Phone: 806-592-6280	