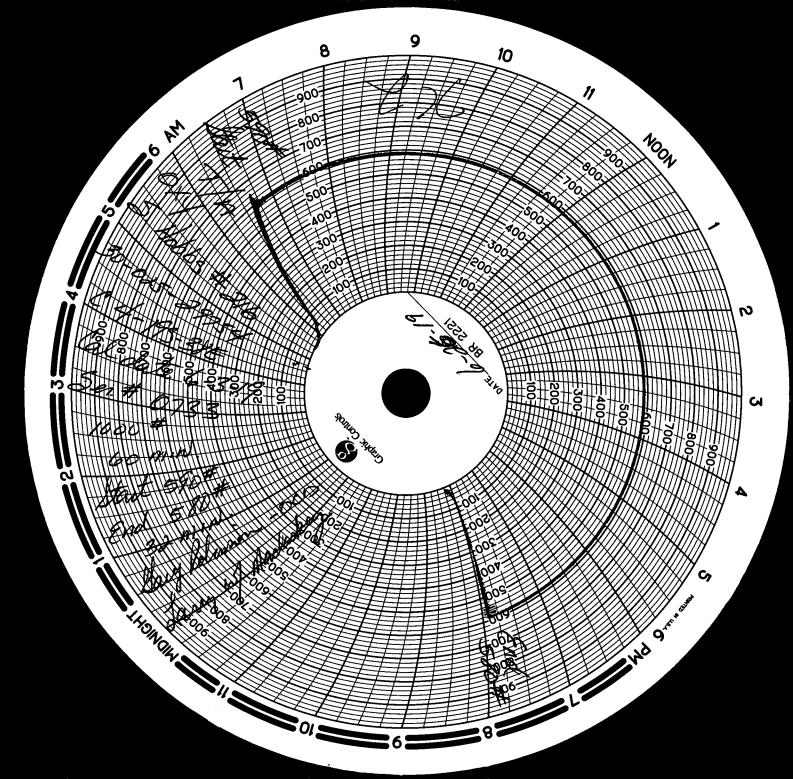
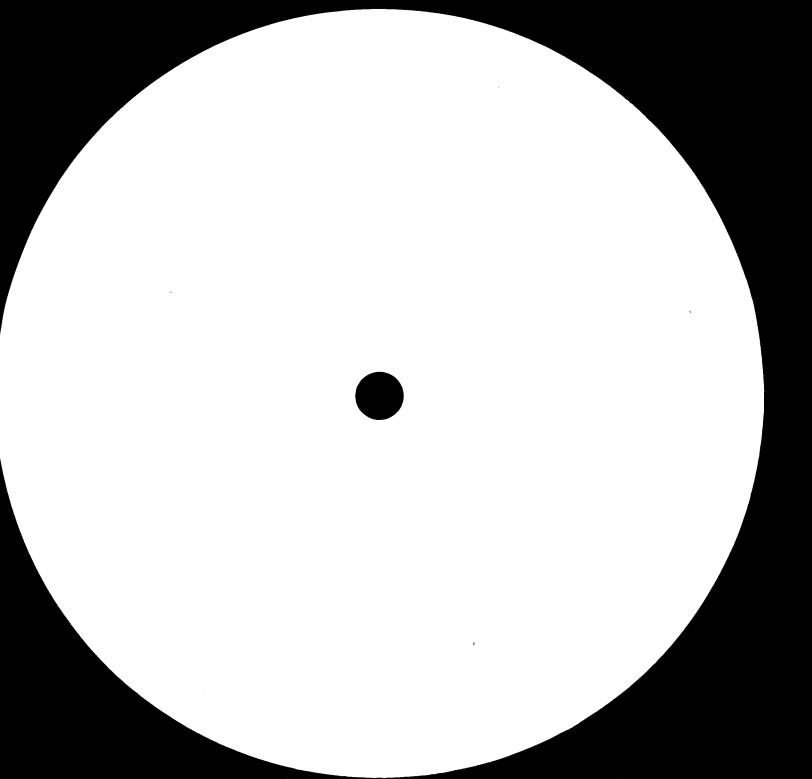
Office	State of New M			Form		
<u>District I</u> – (575) 393-6161	Energy, Minerals and Nat	ural Resources		Revised July 1	18, 2013	
1625 N. French Dr., Hobbs, NM 88240	WELL API NO. 30-025-29754					
<u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION	N DIVISION				
District III - (505) 334-6178	1220 South St. Fra	5. Indicate Type of Lease STATE X FEE				
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 8	7505	6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	ICES AND REPORTS ON WELL		7. Lease Nam	ne or Unit Agreement N	Vame	
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI	South F	South Hobbs (G/SA) Unit				
PROPOSALS.) 1. Type of Well: Oil Well	8. Well Num					
2. Name of Operator	9. OGRID N					
Occidental Permian, Ltd 3. Address of Operator	10. Pool name or Wildcat					
1017 West Stanolind Road	Hobbs (G/SA)					
4. Well Location	.,		1,000,	, 0, 0, 1,		
Unit Letter C :	1166 feet from the North	line and 2	411 feet	from the West	line	
Section 4		ange 38-E	NMPM	County Lea	_	
	11. Elevation (Show whether DF 3615' GL					
			<u>L.</u>			
12. Check	Appropriate Box to Indicate N	Nature of Notice,	Report or Oth	her Data I p. m.		
NOTICE OF IN	ITENTION TO:	l cup	SECHENT	DEDORT OF		
PERFORM REMEDIAL WORK	ITENTION TO: PLUG AND ABANDON □	REMEDIAL WOR		REPORT OF:		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR			"	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN			ш	
DOWNHOLE COMMINGLE	moem ee oom e	O/IOITO/OEIIIEIT		_		
CLOSED-LOOP SYSTEM	•				Л	
OTHER:		OTHER: Casir			<u> </u>	
13. Describe proposed or comp	leted operations. (Clearly state all	pertinent details, an	d give pertiont	dates, including estima	ated date	
of starting any proposed w	ork). SEE RULE 19.15.7.14 NMA completion. 019 nitial - 590 PSI Ending - 580 PSI nutes ITY Robinson NMOCD	C. For Multiple Co	mpletion CAtta	ch wellbore diagram of	f	
proposed completion or rec	ompletion.		٠,			
Date of test: 06/26/2	019 nitial 500 BSI Ending 590 BS	ei -	100 all			
Length of test: 32 mi	nitiai - 590 PSI Ending - 560 PS Inutes	·O	O ABU	20		
Witnessed: Yes - Ga	ry Robinson NMOCD	No.	11 111	15.		
	•	-	D. CE			
FINAL TAS	TATUS- EXTENSION		aft)			
Approval of TA EXPIR			A.			
• •	GGED OR RETURNED					
to PRODUCTION	SOLD ON NETONIALD					
BY THE DATE STATE	DAROVE: 7					
BY THE DATE STATE	DABOVE.					
Γ		<u>-</u>				
Spud Date:	Rig Release D	ate:				
L						
I hereby certify that the information	above is true and complete to the b	est of my knowledg	ge and belief.			
1.1					,	
SIGNATURE /	TITLE Well	Surveillance Lead		_date_ <i></i>	19	
Type or print name Justin Saxon	n	s: Justin_Saxon	യുറു വേന	DLIONE: 575 207 (3206	
Type or print name Justin Saxon For State Use Only	E-mail addres	55: Udatiii_GaxOII(₩0AY.00III	PHONE: 575-397-8	1200	
$\overline{}$	1	0 - 200	- A	011	10	
APPROVED BY: Yeng 7	wes TITLE Con	pleance Off	rest_	DATE 7-16-	<u>/ 7</u>	
Conditions of Approval (if a y):	•	y , v				





<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name OCCIDENTAL PERMIAN, LTD					³ API Number 30-025-29754						
Property Name SOUTH HOBBS (G/SA) UNIT								Well No. 216			
^{7.} Surface Location											
UL - Lot C	Section 4	Township 19-S	Range 38-E		Feet from 1166		S Line ORTH	Feet P 241		E/W Line WEST	County LEA
Well Status											
Well	Status		SHUT-IN		PRODUCING /NJ		6-24-19				
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH											
OBSERVED DATA If bradenhead flowed water, check all of the descriptions that apply:											
		-					term-Prod		(D)Prod Csng		(E)Tubing
Pressure	4 • 4•		0		MA		N/F	۲		0	NONE
Flow Charac	Now Characteristics Puff Y		Y 160	Y/N		Y/N		Y / 🕸			
Steady F	low		Y 650	Y / N		l l	Y / N		Y/60		-
Surge			YIO		Y/N		Y / N		Y 1/60		
	Down to nothing N Gas or Oil Y/O		YO	Y/N Y/N		<u> </u>	Y/N Y/N		Ø/ N Y Ø		
Water	r		Y/00 Y/N					Y / (A)			
If bradenhead	flowed wa	ter. check al	l of the descriptio	ns that a	oply:				•		_
CLEAR FRESH SALTY				SULFUR		BLACK					
Remarks:						INJE	CTING A	ТТНІЅТ	IME	WTR,G	AS,CO2
	1/18										
:											
Signature:						OIL CONSERVATION DIVISION					
Printed name: MENDY JOHNSON						Entered into RBDMS					
Title: ADMINISTRATIVE ASSOCIATE						Re-test			יונץ		
E-mail Address: mendy_johnson@oxy.com						-	<u> </u>				
Date:		Witness: 200-592-6280 Witness: 200-592-6280									
			witness:	ug j							

}