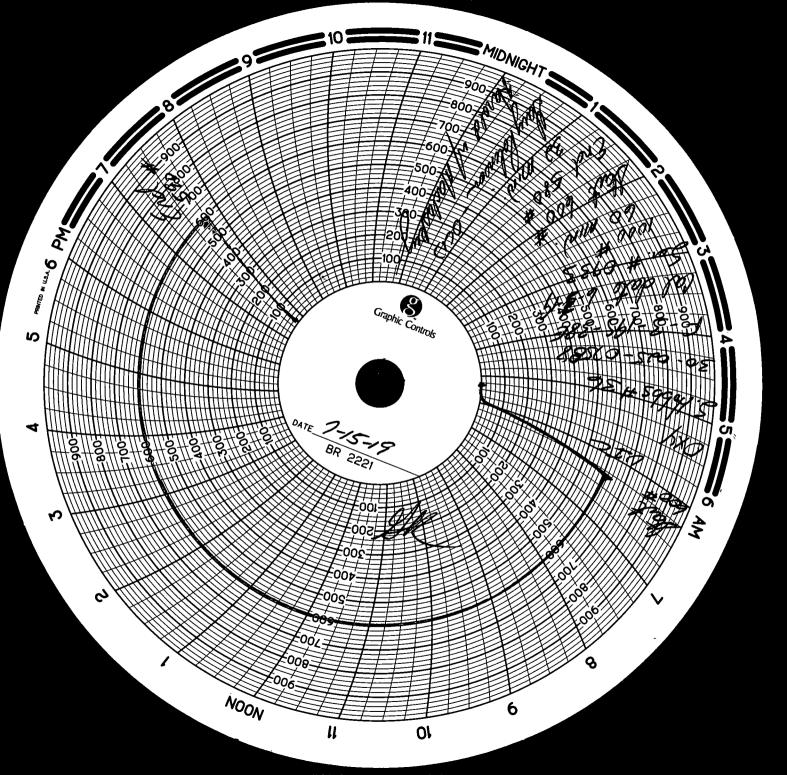
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103						
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., <u>Hobbs. NM</u> 88240	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.						
1625 N. French Dr., Hobbs, NM 8846 District II – (\$73)7748-1355 S CD 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-07588						
District III – (505) 334-6178 1000 Rio Brazos Rd LAzte (1504)	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE						
<u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.						
1220 S. St. Francis Dr., Santa Fe, NM 87505 DECEIVED								
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOS	7. Lease Name or Unit Agreement Name							
DIFFERENT RESERVOIR. USE "APPLIC	"South Hobbs (G/SA) Unit							
PROPOSALS.) 1. Type of Well: Oil Well	8. Well Number 36							
2. Name of Operator	9. OGRID Number 157984							
Occidental Permian, Ltd 3. Address of Operator		10. Pool name or Wildcat						
1017 West Stanolind Road	. Hobbs. NM 88240	Hobbs (G/SA)						
4. Well Location								
Unit Letter F:_	1980 feet from the North line and 19	80feet from theWestline						
Section 3	Township 19-S Range 38-E	NMPM Lea County						
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3617' DF							
	3377 21							
12. Check A	ppropriate Box to Indicate Nature of Notice,	Report or Other Data						
NOTICE OF IN	TENTION TO: CHE	SEQUENT REPORT OF:						
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WOR	<u> </u>						
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRI	LLING OPNS. P AND A						
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	T JOB						
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM	·							
OTHER:	☐ OTHER: Casing	g Integrity Test						
	eted operations. (Clearly state all pertinent details, and							
of starting any proposed wo proposed completion or rec	rk). SEE RULE 19.15.7.14 NMAC. For Multiple Cor ompletion.	mpletions: Attach wellbore diagram of						
Date of test: 07-15-19	-							
Pressure readings: Ini	tial - 600 PSI Ending - 580 PSI							
Length of test: 32 min Witnessed: Yes Gary	utes Robinson NMOCD							
,								
Spud Date:	Rig Release Date:							
Spud Date.	Nig Release Date.							
I hereby certify that the information above is true and complete to the best of my knowledge and belief.								
	7	. ,						
SIGNATURE	TITLE Well Surveillance Lead	DATE 07/22/19						
Type or print name Justin Saxon	E inetin eavon@							
Type or print name Justin Saxon For State Use Only	E-mail address: justin_saxon@	phone: <u>575-397-8206</u>						
	- 1 011							
APPROVED BY: Xary foliations of Approval (if any):	TITLE Corplana Office	DATE 7-26-19						



<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

## SOUTH HOBBS (GSA JUNIT) **SUFFACE Location* **Surface Location* **Surface Location* **Post from NNS Line Feet from 1980 19	Operator Name OCCIDENTAL PERMIAN, LTD						3. API Number 30-025-07588					
UI. Let Section Township Range Feet from NS Line Feet From EW Line County	Property Name SOUTH HOBBS (G/SA) UNIT						L					
F 3 15-S 34-E 1980 NORTH 1980 WEST LEA	^{7.} Surface Location											
Well Status PRODUCING PRO		i	•	*					ļ	l l		•
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR IS MINUTES EACH OBSERVED DATA If bradenhead flowed water, check all of the descriptions that upoliv: Alsur-Linterm												
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR IS MINUTES EACH OBSERVED DATA If bradenhead flowed water, check all of the descriptions that apply: Pressure ASSurt-Interm (D)Interm(1)* Interms(2) (C)Interm-Prod (D)Prod Cong (D)Tubing	Well	Status										
If bradenbead flowed water, check all of the descriptions that apply: Californ Cal	•											
Fressure Flow Characteristics Puff Stady Flow Y D Y D Y D Y D Y D Y D Y D Y D Y D Y D	If bradenhead	flowed wa	ter, check al	l of the descriptio	ns that a		TA					
Flow Characteristics Puff Steady Flow Steady Flow Surges Pown to nothing Gas or Oil Water VAN SULPUR SLACK INJECTING AT THIS TIME WIR, GAS, CO2 Signature: OIL CONSERVATION DIVISION Printed name: MENDY JOHNSON Title: ADMINISTRATIVE ASSOCIATE E-mail Address: mendy_johnson@oxy.com Date: Phone: 806-542-6280		<u>-</u>	(A)S	urf-Interm	-		(C)Interm-Prod		(D)Prod Csng		(E)Tubing	
Steady Flow Steady Flow Surges V/N Surges V/S Surges V/N Surges Surge		tariatica		0	0			NA		0		NO FAUGE
Sirges Down to nothing Gas or Oil YOU YIN YIN YIN YIN YIN YIN Water YIN YIN YIN YIN YIN Water YIN YIN YIN YIN YIN YIN Water YIN YIN YIN YIN YIN Water YIN YIN YIN YIN WIT WATER WIR, GAS, CO2 Signature: OIL CONSERVATION DIVISION Printed name: MENDY JOHNSON Title: ADMINISTRATIVE ASSOCIATE E-mail Address: mendy_iohnson@oxy.com Date: Phone: 806-\$\$2-6280				V N	- V (6)			V/N				_
Down to nothing Gas or Oil Water Water Water SALTY SULFUR BLACK Remarks: INJECTING AT THIS TIMEWTR,GAS,CO2 WIRE Signature: OIL CONSERVATION DIVISION Printed name: MENDY JOHNSON Title: ADMINISTRATIVE ASSOCIATE E-mail Address: mendy_johnson@oxy.com Date: Phone: 806 \$2-6280			- 	Y/N		Y 169				Y	7 <u>60</u>	_
Gas or Oil Y B Y N Y N Y N Y N Y N Y N Y N Y N Y N	Surge	Surges		Y/60 Y/60		Y / 🕅	Y/N			Y	1	-
Water Y W Y N Y N Y N Y N Y N Y Y	Down to no	othing		Ø N	 	N N		Y / N		TY N		1
If bradenhead flowed water, check all of the descriptions that apply: CLEAR	Gas or (Oil		YOU		¥ /60		Y / N		Y (N)		1
Signature: OIL CONSERVATION DIVISION	Water	r		YIN		YN		Y / N		Y		
Signature: OIL CONSERVATION DIVISION	If headenhead	flowed we	ter check al	l of the description	ne that a	nnlv•						
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Date: Phone: 806-5\$2-6280							Re-test			<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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