

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

Form C-103  
 Revised July 18, 2013

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-28306
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19552
7. Lease Name or Unit Agreement Name South Hobbs G/SA Unit
8. Well Number Coop 3
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3634' DF

**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.)

1. Type of Well: Oil Well  Gas Well  Other  Injector

2. Name of Operator  
Occidental Permian LTD

3. Address of Operator  
PO Box 4294 Houston, TX 77210

4. Well Location  
 Unit Letter C : 645 feet from the N line and 2045 feet from the W line  
 Section 4 Township 19S Range 38E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

See attached Sundry detail

**HOBBS OCD**  
**NOV 08 2019**  
**RECEIVED**

Spud Date: 04/17/2019

Rig Release Date: 08/28/2019

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

SIGNATURE April Santos TITLE Regulatory Specialist DATE 10/24/2019

Type or print name April Santos E-mail address: April\_Hood@Oxy.com PHONE: 713-366-5771

**For State Use Only**

APPROVED BY: Kerry Tate TITLE COA DATE 11-15-19  
 Conditions of Approval (if any):

South Hobbs Unit Coop 3 – 430-025-28306

4/17/19: MIRU x NDWH x NUBOP. 4/18/19: POOH 125 jts 2 7/8" tbg x 5 1/2" inj equipment. RIH CIBP @ 4485' x bailed 30' cmt. Tagged toc @ 4455'. Pumped 80 bbls BW. RIH 5 1/2" as1-x injection pkr @ 4093' x 125 jts 2 7/8 tbg @4216'. Ran MIT – chart attached. 4/22/19: RD x NDBOP x NUWH.

6/24/19: MIRU x NDWH x NUBOP. POOH 125 jts 2 7/8" tbg x 5 1/2" inj equipment. Ran CIL from 4442' to surface. 6/25/19: RIH 5 1/2" CIBP @ 4260' x dumped 4 sxs cmt on top. Tagged toc @ 4250' x dump bailed 4 more sxs cmt x tagged cmt @ 4215'. RIH 5 1/2" CICR @ 4060' x tested tbg to 2000 psi which held. Tested csg x indicated the retainer was leaking, stung out of CICR. 6/27/19: Pumped 18 bbls thixotropic cmt x stung back in retainer. Pumped 11 more bbls x squeezing off, then displaced 6 bbls BW getting 8 bbls cmt into formation. Stung out x reversed out w/ 17 bbls cmt w/ 40 bbls BW. 7/1/19 – 7/2/19: Drilled out cmt @ 4030' to PBDT 4450'. Circ well clean x RIH 5 1/2" AS1-X inj pkr @ 4093' x tested pkr to 600 psi, which held ok. 7/3/18: RIH 125 jts 2 7/8" tbg x inj equipment. Ran MIT – chart attached. 7/8/19: RD x NDBOP x NUWH.

8/14/19: MIRU x NDWH x NUBOP. POOH 125 jts 2 7/8" tbg x 5 1/2" inj equipment. RIH 5 1/2" CIBP @ 4260'. 8/15/19: Dumped 5 sxs of sand on top x pumped 24 bbls BW. Tagged sand @ 4225'. Spotted 500 gals 15% hcl acid. RIH pkr @ 4014' x broke down perms from 4154'-4210' w/ 1450 psi. 8/19/19: Pooh pkr x RIH 5 1/2" CICR @ 4000'. 8/20/19: Pumped 100 sxs cmt, x squeezed to 2500psi only getting 7 bbls into formation, stung out retainer. 8/21/19: - 8/22/19: Drilled cmt to 4450' x circ well clean. RIH 5 1/2" KTC pkr @ 4180'. 8/27/19: RIH 5 1/2" as1-x injection pkr @ 4080' x Ktc hydraulic pkr @ 4260' 8/28/19: RIH 124 jts 2 7/8" tbg @ 4072' x 6 jts 2 7/8" tbg @ 4258' x on/off tool. Ran MIT – chart attached. RD x NDBOP x NUWH.





District I  
 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 <i>Occidental Permian LTD</i>		API Number <i>30-025-28306</i>
Property Name <i>Hobbs (GSA) Field</i>		Well No. <i>SHU COOP 3</i>

<sup>2</sup> Surface Location

UL - Lot	Section	Township	Range	Feet from	NS Line	Feet From	E/W Line	County
<i>C</i>	<i>4</i>	<i>19S</i>	<i>38-E</i>	<i>105</i>	<i>N</i>	<i>205</i>	<i>W</i>	<i>Lea</i>

Well Status

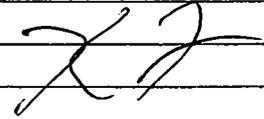
TA'D WELL YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> YES	SHUT-IN NO	<input checked="" type="radio"/> YES	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>8-28-2019</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgng	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>0</i>
<u>Flow Characteristics</u>					<i>NOT Injected</i>
Puff	<input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/>	CO2 <i>—</i>
Steady Flow	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / <input checked="" type="radio"/>	WTR <i>—</i>
Surges	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / <input checked="" type="radio"/>	GAS <i>—</i>
Down to nothing	<input checked="" type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> N	Type of Fluid
Gas or Oil	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / <input checked="" type="radio"/>	Injected for
Water	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / <input checked="" type="radio"/>	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.

*Reverse unit PDS  
 Serial # DCM 340  
 @-1000 PSE  
 Calibration Date: 8-19-19  
 Start 630 End 650*

Signature:	<b>OIL CONSERVATION DIVISION</b>  Entered into RBDMS  Re-test  
Printed name:	
Title:	
E-mail Address:	
Date:	
Phone:	Witness:

INSTRUCTIONS ON BACK OF THIS FORM

District I  
 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 <i>Occidental Permian LTD</i>		API Number <i>30-0252 28306</i>
Property Name <i>South Hobbs (GSA) Field</i>		Well No. <i>COOP #3</i>

**Surface Location**

UL - Lot <i>C</i>	Section <i>4</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>645</i>	N/S Line <i>N</i>	Feet From <i>2045</i>	E/W Line <i>W</i>	County <i>Lea</i>
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**Well Status**

TA'D WELL YES	<input checked="" type="radio"/>	SHUT-IN NO	<input checked="" type="radio"/>	INJECTOR SWD	<input checked="" type="radio"/>	PRODUCER GAS	DATE <i>4-18-19</i>
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**OBSERVED DATA**

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>✓</i>	<i>✓</i>	<i>0</i>	<i>0</i>
<b>Flow Characteristics</b>					<i>Not 3ms</i>
Puff	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	WTR <input type="checkbox"/>
Surges	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	GAS <input type="checkbox"/>
Down to nothing	<i>(Y) N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>(N) / 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.

*Reverse valve PDS Post workover MET*  
*Serial # 12517*  
*Cal Date 1/18/19*  
*Stand 560 End 570*

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>XZ</i>
Date:	Phone:
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM