

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. 30-025-26980
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State "A"
8. Well Number 38
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs (G/SA)

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PUMP BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily Abandoned	
2. Name of Operator Occidental Permian, Ltd	
3. Address of Operator HCR 1 Box 90 Denver City, TX 79323	
4. Well Location Unit Letter <u>J</u> : <u>1880</u> feet from the <u>South</u> line and <u>1730</u> feet from the <u>East</u> line Section <u>4</u> Township <u>19-S</u> Range <u>38-E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3608' GL	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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: Casing integrity test/TA status extension request <input checked="" 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.

Date of test: 11/1/2019
Pressure readings: Initial - 580 PSI Ending - 580 PSI
Length of test: 32 minutes
Witnessed: Yes - Kerry Fortner - NMOCD

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 11-18-20
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: 11-27-19

Spud Date:

Rig Release Date:

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

SIGNATURE [Signature] TITLE Well Surveillance Lead DATE 11/25/2019

Type or print name Justin Saxon E-mail address: justin_saxon@oxy.com PHONE: 575-397-8206

For State Use Only

APPROVED BY: Kerry Fortner TITLE C.O. A DATE 11-27-19

Conditions of Approval (if any):

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

BRADENHEAD TEST REPORT

Operator Name OCCIDENTAL PERMIAN, LTD	API Number 30-025-26980
Property Name STATE A (AMOCO)	Well No. 38

7. Surface Location

UL - Lot J	Section 4	Township 19-S	Range 38-E	Feet from 1880	N/S Line SOUTH	Feet From 1730	E/W Line EAST	County LEA
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Well Status

Well Status TA	SHUT-IN /	PRODUCING IMS	DATE 11-19-19
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

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

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Csg	(E)Tubing
Pressure	0	NA	NA	0	0
Flow Characteristics					TA
Puff	Y / 0	Y / N	Y / N	0 / N	
Steady Flow	Y / 0	Y / N	Y / N	Y / 0	
Surges	Y / 0	Y / N	Y / N	Y / 0	
Down to nothing	0 / N	Y / N	Y / N	0 / N	
Gas or Oil	Y / 0	Y / N	Y / N	Y / 0	
Water	Y / 0	Y / N	Y / N	Y / 0	

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

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:

INJECTING AT THIS TIME ___ WTR, ___ GAS, ___ CO2

TA STATUS TEST
(TA) MacLuskey
Ser# 500-7150-1800
CAL 11/1/19

S 580# E 580#

Signature:	OIL CONSERVATION DIVISION
Printed name: Justin Saxon	Entered into RBDMS
Title: Well Surveillance Lead	Re-test
E-mail Address: justin_saxon@oxy.com	
Date: 11-19-19	
Phone: 806-592-6280	
Witness: Kerry Fortner - OCD	

399-3221

