

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

WELL API NO. 30-025-42469
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Hobbs G/SA Unit
8. Well Number 953
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3677' KB

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO 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 <input type="checkbox"/> Injector <input type="checkbox"/>
2. Name of Operator Occidental Permian LTD
3. Address of Operator PO Box 4294 Houston, TX 77210
4. Well Location Unit Letter P : 837 feet from the S line and 1277 feet from the E line Section 18 Township 18S Range 38E NMPM County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <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.

11/4/19: MIRU x NDWH x NUBOP.

11/5/19: POOH 132 jts 2 7/8" tbg x 7" AS1-X inj pkr x 7" KTC hydraulic pkr x equipment.

RIH replacement 7" DLH hydraulic pkr @ 4420' x 7" AS1-X injection pkr @ 4318'.

11/6/19: RIH 139 jts 2 7/8" tbg @ 4422' x inj equipment.

Ran MIT - chart attached. RD x NDBOP x NUWH.

Spud Date:

11/04/2019

Rig Release Date:

11/06/2019

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 12/17/2019

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

For State Use Only

APPROVED BY: Kerry Fisher TITLE C.O A DATE 12-23-19

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 <b>Occidental Permian LTD</b>		API Number <b>30-025-42469</b>
Property Name <b>North Hobbs (GSA) Unit</b>		Well No. <b>18-953</b>

2. Surface Location

UL - Lot <b>P</b>	Section <b>18</b>	Township <b>18S</b>	Range <b>38E</b>	Feet from <b>837</b>	N/S Line <b>S</b>	Feet from <b>1277</b>	E/W Line <b>E</b>	County <b>Lea</b>
----------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES <input checked="" type="radio"/>	SHUT-IN YES <input checked="" type="radio"/>	INJECTOR <input checked="" type="radio"/>	SWD	OIL PRODUCER OIL <input checked="" type="radio"/>	GAS	DATE <b>8-13-19</b>
---	---	--	-----	--	-----	------------------------

OBSERVED DATA

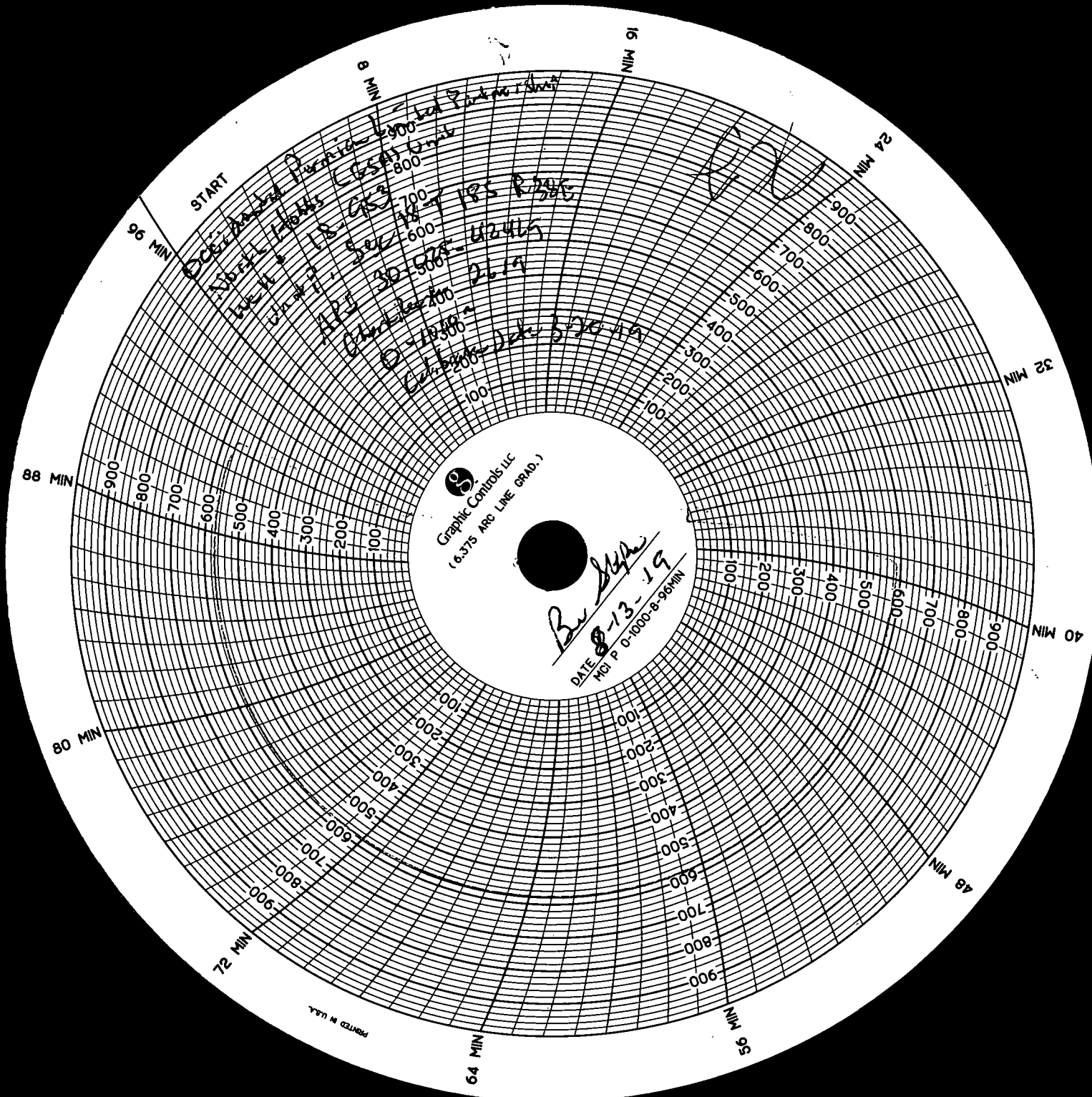
	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>			<b>0</b>	
Flow Characteristics					<b>NOT In System</b>
Puff	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	CO2 <input type="checkbox"/>
Steady Flow	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	WTR <input type="checkbox"/>
Surges	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	Type of Fluid Injected for Waterflood if applies
Gas or Oil	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	
Water	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Reverse Unit 0-1000"  
Serial = 2619  
Calibration Date 3-20-19  
Start 580 End 560

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

INSTRUCTIONS ON BACK OF THIS FORM



START

Decomposed Power Control System  
Stock Market  
185 P. 245  
30-500-4246  
2.19  
D-1000  
Cable Date 8/13/19

Graphic Controls LLC  
16.375 Arc Line Grad.

Bu Dyer  
DATE 8-13-19  
NIN-6-8-000-0  
MCI P

PRINTED IN U.S.A.

District 1  
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 Limited Partnership</i>		API Number <i>30-025-42269</i>
Property Name <i>North Hobbs (GSA) Unit</i>		Well No. <i>18-953</i>

Surface Location				Feet From	E/W Line	County
U/Lot <i>P</i>	Section <i>18</i>	Township <i>18</i>	Range <i>2</i>	<i>1221</i>	<i>E</i>	<i>Lea</i>

TA'D WELL YES	DATE <i>11-6-19</i>
------------------	------------------------

