

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. 30-25-07658
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Hobbs (G/SA) Unit
8. Well Number 62
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs (G/SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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  **HOBBS OCD**

2. Name of Operator  
Occidental Permian, Ltd **DEC 26 2019**

3. Address of Operator  
1017 W Stanolind Rd, Hobbs NM 88240 **RECEIVED**

4. Well Location  
Unit Letter D : 660 feet from the North line and 660 feet from the West line  
Section 9 Township 19-S Range 38-E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data √ p-m

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK  PLUG AND ABANDON   
 TEMPORARILY ABANDON  CHANGE PLANS   
 PULL OR ALTER CASING  MULTIPLE COMPL   
 DOWNHOLE COMMINGLE   
 CLOSED-LOOP SYSTEM   
 OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB   
 OTHER:  T/A

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: 12/10/2019  
 Pressure readings: Initial -610 PSI Ending 610 PSI  
 Length of test: 32 min  
 Witnessed: YES - Gary Robinson - NMOCD

**FINAL TA STATUS- EXTENSION**

Approval of TA EXPIRES: 6-10-20  
 Well needs to be PLUGGED OR RETURNED  
 to PRODUCTION  
 BY THE DATE STATED ABOVE: X 7

Spud Date:

Rig: \_\_\_\_\_

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 12-26-19

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

**For State Use Only**

APPROVED BY: [Signature] TITLE CO A DATE 12-26-19

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 30-025-07658
Property Name SOUTH HOBBS (G/SA) UNIT	Well No. 62

**7. Surface Location**

UL - Lot D	Section 9	Township 19-S	Range 38-E	Feet from 660	N/S Line NORTH	Feet From 660	E/W Line WEST	County LEA
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**Well Status**

Well Status <i>T/A</i>	SHUT-IN <i>YES</i>	PRODUCING <i>OIL</i>	DATE <i>12-10-19</i>
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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	<i>NONE</i>
<b>Flow Characteristics</b>					
Puff	<i>/</i>	<i>/</i>	<i>/</i>	Y/N <input checked="" type="radio"/>	
Steady Flow	<i>/</i>	<i>/</i>	<i>/</i>	Y/N <input checked="" type="radio"/>	
Surges	<i>/</i>	<i>/</i>	<i>/</i>	Y/N <input checked="" type="radio"/>	
Down to nothing	<i>/</i>	<i>/</i>	<i>/</i>	<input checked="" type="radio"/> Y/N	
Gas or Oil	<i>/</i>	<i>/</i>	<i>/</i>	Y/N <input checked="" type="radio"/>	
Water	<i>/</i>	<i>/</i>	<i>/</i>	Y/N <input checked="" type="radio"/>	

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

CLEAR	FRESH	SALTY	SULFUR	BLACK
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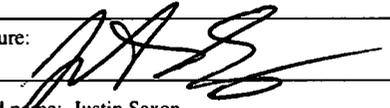
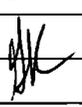
Remarks: INJECTING AT THIS TIME \_\_\_ WTR, \_\_\_ GAS, \_\_\_ CO2

*T/A TEST*

**HOBBS OCD**

DEC 16 2019

**RECEIVED**

Signature: 	OIL CONSERVATION DIVISION
Printed name: Justin Saxon	Entered into RBDMS 
Title: Well Surveillance Lead	Re-test
E-mail Address: mendy_johnson@oxy.com	
Date:	Phone: 575-397-8206
Witness: 	

