

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. 30-025-07652
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 South Hobbs Unit (G/SA) UNIT
8. Well Number 61
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 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 **Temporarily Abandoned**

2. Name of Operator
Occidental Permian, Ltd

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

4. Well Location
 Unit Letter **A** : **330** feet from the **Center** line and **330** feet from the **East** line
 Section **8** Township **19-S** Range **38-E** NMPM County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

HOBBS OGD
 MAY 21 2020
 RECEIVED

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 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: Casing integrity test/ TA status extension request <input checked="" type="checkbox"/>	
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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 04/2/20
 Pressure readings initial- 590 ending 580
 length of test 60minutes
 Witnessed- NO

FINAL TA STATUS- EXTENSION
 Approval of TA EXPIRES: 4/1/21
 Well needs to be PLUGGED OR RETURNED
 to PRODUCTION
 BY THE DATE STATED ABOVE: XJ

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 Justin Saxon TITLE Well Surveillance Lead DATE 04-14-2020

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

For State Use Only

APPROVED BY: Kenny Jantz TITLE CO A DATE 5-22-20
 Conditions of Approval (if any):

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 OCCIDENTAL PERMIAN, LTD	API Number 30-025-07652
Property Name SOUTH HOBBS (GSA) UNIT	Well No. 61

Surface Location

UL - Lot A	Section 8	Township 19-S	Range 38-E	Feet from 330	N/S Line NORTH	Feet From 330	E/W Line EAST	County LEA
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Well Status

<input checked="" type="checkbox"/> TA'D Well	No	<input checked="" type="checkbox"/> SHUT-IN	No	<input checked="" type="checkbox"/> INJECTOR	SWD	OIL	PRODUCING	GAS	DATE 4/2/20
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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 Casing	(E) Tubing
Pressure					
Flow Characteristics					
Full	Y/N	/	/	Y/N	CO2 ___
Steady Flow	Y/N	/	/	Y/N	WTR ___
Surges	Y/N	/	/	Y/N	GAS ___
Down to nothing	Y/N	/	/	Y/N	Type of Fluid
Gas or Oil	Y/N	/	/	Y/N	Injected for
Water	Y/N	/	/	Y/N	Water Flood if
					applies

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

THA

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Justin Saxon</i> Alfredo Cervantes	Entered into RBDMS
Title: <i>Company Man</i>	Re-test <i>[Signature]</i>
E-mail Address: Justin_Saxon@oxy.com	
Date:	Phone: 575-397-8206
	Witness:

