

District 2-Artesia Field Office  
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Submit 1 Copy

State of New Mexico  
EMNRD-OIL CONSERVATION DIVISION

## BRADENHEAD TEST REPORT

Operator Name <b>Ray Westall Operating</b>		API Number <b>30-015-29618</b>
Property Name <b>EMPIRE A Fed</b>		Well No. <b>2</b>

## 7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<b>H</b>	<b>27</b>	<b>18S</b>	<b>29E</b>	<b>1650</b>	<b>N</b>	<b>660</b>	<b>E</b>	<b>Eddy</b>

## Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES NO	YES NO	INJ <b>SWD</b>	OIL GAS	<b>9-21-20</b>

## OBSERVED DATA

	(A) Surf-Interm.	(B) Interm. (1)	(C) Interm. (2)	(D) Prod Casing	(E) Tubing
Pressure			<b>0</b>	<b>0</b>	<b>1790</b>
Flow Characteristics					
Puff	Y / N	Y / N	<b>Y / N</b>	Y / <b>N</b>	CO2 _____
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR _____
Surges	Y / N	Y / N	Y / N	Y / N	GAS _____
Down to nothing	Y / N	Y / N	Y / N	Y / N	If applicable type
Gas or Oil	Y / N	Y / N	Y / N	Y / N	fluid injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood

If Braden head flowed water, check all the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: Please state for each string (A, B, C, D, E) pertinent information regarding bleed down or continuous build up if applies.

Accepted for recorded test not witnessed

Signature: <b>Sen Hope</b>	OIL CONSERVATION DIVISION
Print name:	Recorded online:
Title:	Re-test:
E-mail Address:	Phone #:
Date: <b>9/23/20</b>	Witness: