

HOBBS

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

NOV 20 2015

BRADENHEAD TEST REPORT

RECEIVED
ADL Number

Operator Name <i>Oxy</i>	30-025-31650
Property Name <i>Anacapa Soil</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>0</i>	Section <i>4</i>	Township <i>23S</i>	Range <i>32E</i>	Feet from <i>330</i>	N/S Line <i>S</i>	Feet From <i>2310</i>	E/W Line <i>E</i>	County <i>LCA</i>
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR INJ	PRODUCER OIL	GAS	DATE <i>11/20/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>1000</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>X</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if
					applies.

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

Signature: <i>Tommy Powell</i>	OIL CONSERVATION DIVISION
Printed name: <i>TOMMY POWELL</i>	Entered into RBDMS <i>BS</i>
Title: <i>PRODUCTION TECH</i>	Re-test
E-mail Address:	
Date: <i>11/20/15</i>	Phone:
Witness: <i>Tommy Powell</i>	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 02 2015