

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

BRADENHEAD TEST REPORT

HOBBS OCD
MAR 11 2016
RECEIVED

Operator Name Chevron	USA INC ✓	API Number 30-025-25801 ✓
Property Name Central Vacuum Unit	✓	Well No. 120 ✓

Surface Location

UL - Lot D	Section 7	Township 18S	Range 35E	Feet from 60	N/S Line N	Feet From 1100	E/W Line W	County Lea
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR INJ	SWD	PRODUCER OIL	GAS	DATE 2-26-16
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0	N/A	0	1400
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 —
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR X
Surges	Y / N	Y / N	Y / N	Y / N	GAS —
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	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>Tanner</i>	OIL CONSERVATION DIVISION
Printed name: Tanner DeHaan	Entered into RBDMS <i>Be</i>
Title: FSA	Re-test
E-mail Address: TZYR@Chevron.com	
Date: 2-26-16	Phone: 575-390-4449
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 14 2016

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Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

HOBBS OCD
MAR 11 2016
RECEIVED

BRADENHEAD TEST REPORT

Operator Name Chevron	USA INC ✓	API Number 30-025-25798 ✓
Property Name Central Vacuum Unit ✓	Well No. 113 ✓	

7. Surface Location

UL - Lot L	Section 6	Township 18S	Range 35E	Feet from 1620	N/S Line S	Feet From 1100	E/W Line W	County Lea ✓
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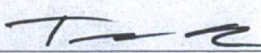

Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR NO	SWD OIL	PRODUCER GAS	DATE 2-26-16
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0	N/A	0	1870
Flow Characteristics					
Puff	Y / 0	Y / N	Y / N	Y / 0	CO2 —
Steady Flow	Y / 0	Y / 0	Y / N	Y / 0	WTR X
Surges	Y / 0	Y / 0	Y / N	Y / 0	GAS —
Down to nothing	0 / N	0 / N	Y / N	0 / N	Type of Fluid
Gas or Oil	Y / 0	Y / 0	Y / N	Y / 0	Injected for
Water	Y / 0	Y / 0	Y / N	Y / 0	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: 	OIL CONSERVATION DIVISION
Printed name: Tanner DeHaan	Entered into RBDMS 
Title: FSA	Re-test
E-mail Address: TZYR@Chevron.com	
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