

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 <b>Stephens &amp; Johnson Operating Co.</b>		API Number <b>300-25-05211</b>
Property Name <b>Denton North Wolfcamp Unit</b>		Well No. <b>Tract 7 No. 3</b>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
M	36	14S	37E	660	South	660	West	Lea

Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input checked="" type="checkbox"/> SWD <input type="checkbox"/>	OIL <input type="checkbox"/> GAS <input type="checkbox"/>	1-28-22

OBSERVED DATA

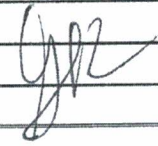
	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0		0	2400 <sup>ask</sup> 4400
Flow Characteristics					
Puff	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Y / <input checked="" type="checkbox"/> N	CO2 _____
Steady Flow	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Y / <input checked="" type="checkbox"/> N	WTR <u>X</u>
Surges	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N	GAS _____
Down to nothing	<input checked="" type="checkbox"/> / N	<input checked="" type="checkbox"/> / N	Y / N	<input checked="" type="checkbox"/> / N	If applicable type
Gas or Oil	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Y / <input checked="" type="checkbox"/> N	fluid injected for
Water	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/> N	Y / N	Y / <input checked="" type="checkbox"/> N	Waterflood

If bradenhead flowed water, check all of 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.

*None*

Signature:	OIL CONSERVATION DIVISION Entered into RBDMS Re-test 
Printed name:	
Title:	
E-mail Address:	
Date:	
Phone:	
Witness: <i>Jay Peterson</i>	

**District I**  
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 Phone:(575) 393-6161 Fax:(575) 393-0720

**District II**  
 811 S. First St., Artesia, NM 88210  
 Phone:(575) 748-1283 Fax:(575) 748-9720

**District III**  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 Phone:(505) 334-6178 Fax:(505) 334-6170

**District IV**  
 1220 S. St Francis Dr., Santa Fe, NM 87505  
 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 77177

**CONDITIONS**

Operator: STEPHENS & JOHNSON OP CO P.O. Box 2249 Wichita Falls, TX 76307	OGRID: 19958
	Action Number: 77177
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

**CONDITIONS**

Created By	Condition	Condition Date
gcordero	None	2/9/2022