

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

BRADENHEAD TEST REPORT

Operator Name <i>James Diwi</i>		API Number <i>30-025-36006</i>	
Property Name <i>SWD</i>		Well No. <i>10</i>	

* Surface Location									
UL - Lat.	Section	Township	Range	Feet from	N/S Line	Feet from	E/W Line	County	
<i>K</i>	<i>16</i>	<i>22S</i>	<i>32E</i>	<i>1980</i>	<i>S</i>	<i>1980</i>	<i>W</i>	<i>Lea</i>	

Well Status									
YES	TA'D WELL	NO	YES	SHUT-IN	NO	INJ	INJECTOR	PRODUCER	DATE
							<i>SWD</i>		<i>2/18/15</i>

OBSERVED DATA

	(A) Surface	(B) Interwell	(C) Intermediate	(D) Production	(E) Tubing
Pressure	<i>p</i>	<i>N/A</i>	<i>N/A</i>	<i>φ</i>	<i>1034</i>
Flow Characteristics					
Fert	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 —
Steady flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR —
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS —
Down to working	<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>	Pressure
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Flow rate

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

*BS 2/18/2015*

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>2/18/15</i>	Phone:
Witness: <i>[Signature]</i>	

FEB 20 2015