

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

HOBBS OCD

MAR 17 2016

BRADENHEAD TEST REPORT

RECEIVED

Operator Name Chevron	USA INC ✓	API Number 30-025-26786 ✓
Property Name Central Vacuum Unit ✓	Well No. 142 ✓	

Surface Location

U/L - Lot I	Section 6	Township 18S	Range 35E	Feet from 1680	N/S Line S	Feet From 330	E/W Line E	County Lea ✓
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Well Status

TA'D WELL YES <input checked="" type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR INJ <input checked="" type="radio"/> SWD <input type="radio"/>	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE 2-25-16
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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	1600
Flow Characteristics					
Puff	Y / <input checked="" type="radio"/>	Y / <input checked="" type="radio"/>	Y / N	Y / N	CO2 <input type="checkbox"/>
Steady Flow	Y / <input checked="" type="radio"/>	<input checked="" type="radio"/> N	Y / N	Y / N	WTR <input checked="" type="checkbox"/>
Surges	Y / <input checked="" type="radio"/>	Y / <input checked="" type="radio"/>	Y / N	Y / N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> N	<input checked="" type="radio"/> N	Y / N	Y / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / <input checked="" type="radio"/>	Y / <input checked="" type="radio"/>	Y / N	Y / N	
Water	Y / <input checked="" type="radio"/>	Y / <input checked="" type="radio"/>	Y / N	Y / N	

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

Signature:	B8 3/23/16
Printed name: Tanner DeHaan	OIL CONSERVATION DIVISION
Title: FSA	Entered into RBDMS B8 ✓
E-mail Address: TZYR@Chevron.com	Re-test
Date: 2-25-16	
Phone: 575-390-4449	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 24 2016
MAR 24 2016