

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

BRADENHEAD TEST REPORT

Operator Name <i>Newbourne Oil Company</i>	API Number <i>30-025-29252-00-00</i>
Property Name <i>QPBSSU</i>	Well No. <i>7A-10</i>

7. Surface Location

UL - Lot <i>6</i>	Section <i>27</i>	Township <i>18S</i>	Range <i>32E</i>	Feet from <i>2310</i>	N/S Line <i>N</i>	Feet From <i>2310</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	NO	<input checked="" type="radio"/> INJ	INJECTOR SWD	PRODUCER OIL	GAS	DATE <i>08/26/15</i>
------------------	-------------------------------------	----------------	----	--------------------------------------	-----------------	-----------------	-----	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0 #</i>			<i>0 #</i>	<i>1810 #</i>
Flow Characteristics					
Puff	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <input type="checkbox"/>
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.

NM OIL CONSERVATION  
ARTESIA DISTRICT

SEP 02 2015

RECEIVED

Signature: <i>[Signature]</i>	<i>BS 9/16/2015</i>
Printed name: <i>Cade Carter</i>	OIL CONSERVATION DIVISION
Title: <i>Production Engineer</i>	Entered into RBDMS
E-mail Address: <i>ccarter@newbourne.com</i>	Re-test
Date: <i>08/26/15</i>	
Phone: <i>575-390-6155</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

18  
SEP 18 2015