

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

HOBBS OCD
 MAR 06 2017
 RECEIVED

Operator Name ConocoPhillips Company		API Number 3002526514
Well Name East Vacuum GB-SA 0546		Well No 001

Surface Location

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
B	5	18S	35E	1100	N	1600	E	LEA

Well Status

TA'D WELL	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="radio"/> NO <input checked="" type="radio"/>	YES <input type="radio"/> NO <input checked="" type="radio"/>	INJ <input type="radio"/> SWD <input type="radio"/>	OIL <input checked="" type="radio"/> GAS <input type="radio"/>	2-7-17

OBSERVED DATA

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure	0	—	—	90	90
Flow Characteristics					CO2___
Puff	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	WTR___
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	GAS___
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	
Down to Nothing	<input checked="" type="radio"/> Y / N	Y / N	Y / N	Y / N	
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	
Water	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	

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

Signature: <i>[Handwritten Signature]</i>	OIL CONSERVATION DIVISION
Print name: <i>Chad Wiley</i>	Entered in RBDMS
Title: <i>M/SO</i>	Re-test
E-mail Address: <i>Chad.wiley@cp.com</i>	<i>[Handwritten Signature]</i>
Date: <i>2-7-17</i>	
Phone: <i>704-2185</i>	
Witness:	