

3-19-18

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

BRADENHEAD TEST REPORT

<p>HOBBS OCD MAR 26 2018 RECEIVED</p>	Operator Name CHEVRON USA Wc	API Number 30-025- 20784
	Property Name CENTRAL VACUUM UNIT	Well No. 265

7. Surface Location									
UL - Lot E	Section 31	Township 17S	Range 35E	Feet from 2030	N/S Line N	Feet From 510	E/W Line W	County LEA	

Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJ INJECTOR INJ <input type="radio"/> SWD <input checked="" type="radio"/>	PRODUCER GAS <input type="radio"/> OIL <input checked="" type="radio"/>	DATE 3-6-2018
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	—	—	240	540
Flow Characteristics					
Puff	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / N	CO2 <u> X </u>
Steady Flow	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / N	WTR <u> X </u>
Surges	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / N	GAS <u> — </u>
Down to nothing	<input checked="" type="radio"/> / N	Y / N	Y / N	Y / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / <input checked="" type="radio"/>	Y / N	Y / N	Y / N	
Water	Y / <input checked="" type="radio"/>	Y / N	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: <i>Jameson Evans LKkm</i>	OIL CONSERVATION DIVISION
Printed name: JAMESON EVANS	Entered into RBDMS
Title: FIELD SPECIALIST A	Re-test XX
E-mail Address: LKKM@CHEVRON.COM	
Date: 3-6-2018	Phone: 575-704-2467
Witness: <i>Kerry Fortner - OCD</i>	

399-3221

INSTRUCTIONS ON BACK OF THIS FORM