

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

HOBBS OCD

APR 20 2013

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Remnant Oil</i>		API Number <i>30-005-29150</i>
Property Name <i>Rock Queen</i>		Well No. <i>#306</i>

Surface Location									
UL - Lot <i>B</i>	Section <i>26</i>	Township <i>13S</i>	Range <i>31E</i>		Feet from <i>810</i>	N/S Line <i>N</i>	Feet From <i>1990</i>	E/W Line <i>E</i>	County <i>Chaves</i>

Well Status								DATE
TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR <input checked="" type="radio"/> INJ	SWD	OIL	PRODUCER	GAS		<i>4-17-18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>50</i>	<i>660</i>
Flow Characteristics					
Pull	<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.

*Prod. csg. blew to zero in 3 min.*

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

INSTRUCTIONS ON BACK OF THIS FORM