

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

**HOBBS OOD**  
**APR 22 2019**  
**RECEIVED**

Operator Name <b>ConocoPhillips Company</b>	API Number <b>3002527115</b>
--	---------------------------------

Well Name <b>East Vacuum GB-SA 2622</b>	Well No <b>005</b>
--	-----------------------

**Surface Location**

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
C	26	17S	35E	340	N	2300	W	LEA

**Well Status**

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	PRODUCER OIL <input checked="" type="radio"/> GAS	DATE <b>3/11/19</b>
--	--	--	--	------------------------

**OBSERVED DATA**

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure	$\emptyset$			100	1180
Flow Characteristics					CO2
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	Y / N	Y / N	Y / N	WTR <input checked="" type="checkbox"/> X
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 / <input type="radio"/> 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.

None

Signature: <i>A. Gonzalez</i>	OIL CONSERVATION DIVISION
Print name: <i>Adrian Gonzalez</i>	Entered in RBDMS
Title: <i>MSO</i>	Re-test
E-mail Address: <i>Adrian.Gonzalez@conocophillips.com</i>	<i>GR</i>
Date: <i>3/11/19</i>	
Phone: <i>575-704-2332</i>	
Witness:	