

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

Operator Name ConocoPhillips Company HOBBS OCD		API Number 3002526570
Well Name East Vacuum GB-SA Unit 2150		Well No 001W
BEE Gonzalez		

APR 10 2020
RECEIVED

Surface Location

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
P	21	17S	35E	10	S	1310	E	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 type="radio"/> GAS	DATE 2-20-20
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OBSERVED DATA

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure	0	/	/	0	1300
Flow Characteristics		/	/		CO2 _____
Puff	Y / <input checked="" type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> Y / N	WTR _____
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	GAS _____
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	
Down to Nothing	<input checked="" type="radio"/> Y / N	Y / N	Y / N	<input checked="" type="radio"/> Y / N	
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	
Water	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	

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

*UJC
ATT*

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