

District I  
1625 N French Dr., Hobbs, NM 88240  
Phone: (575) 393-6151 Fax: (575) 393-0720

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

## BRADENHEAD TEST REPORT

|                                  |                                   |
|----------------------------------|-----------------------------------|
| Operator Name<br><b>EXTEX</b>    | API Number<br><b>30-025-07245</b> |
| Property Name<br><b>Schlenck</b> | Well No.<br><b>#1</b>             |

## Surface Location

|                      |                      |                        |                     |                         |                       |                         |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|-----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><b>A</b> | Section<br><b>20</b> | Township<br><b>13S</b> | Range<br><b>38E</b> | Feet from<br><b>660</b> | N/S Line<br><b>N.</b> | Feet From<br><b>660</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|-----------------------|-------------------------|----------------------|----------------------|

## Well Status

|                  |           |                |           |     |                        |     |                 |                        |
|------------------|-----------|----------------|-----------|-----|------------------------|-----|-----------------|------------------------|
| TA'D WELL<br>YES | <b>NO</b> | SHUT-IN<br>YES | <b>NO</b> | INJ | INJECTOR<br><b>SWD</b> | OIL | PRODUCER<br>GAS | DATE<br><b>7-28-22</b> |
|------------------|-----------|----------------|-----------|-----|------------------------|-----|-----------------|------------------------|

## OBSERVED DATA

|                      | (A)Surface   | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg  | (E)Tubing                               |
|----------------------|--------------|--------------|--------------|--------------|-----------------------------------------|
| Pressure             | <b>0</b>     | <b>0</b>     |              | <b>5</b>     | <b>30</b>                               |
| Flow Characteristics |              |              |              |              |                                         |
| Puff                 | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | CO2                                     |
| Steady Flow          | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | WTR <input checked="" type="checkbox"/> |
| Surges               | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | GAS <input type="checkbox"/>            |
| Down to nothing      | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Type of Fluid                           |
| Gas or Oil           | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Injected for                            |
| Water                | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Y / <b>N</b> | Waterhead if                            |
|                      |              |              |              |              | applies                                 |

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

**Surface valve needs replaced.**

|                                 |                           |
|---------------------------------|---------------------------|
| Signature:                      | OIL CONSERVATION DIVISION |
| Printed name:                   | Entered into RBDMS        |
| Title:                          | Re-test                   |
| E-mail Address:                 |                           |
| Date:                           |                           |
| Phone:                          |                           |
| Witness: <b>Cheryl Robinson</b> |                           |

INSTRUCTIONS ON BACK OF THIS FORM

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 155587

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>Extex Operating Company<br>1616 S. Voss Road<br>Houston, TX 77057 | OGRID:<br>330423                                           |
|                                                                                | Action Number:<br>155587                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|                |           |                |
|----------------|-----------|----------------|
| Created By     | Condition | Condition Date |
| timothy.martin | None      | 9/6/2024       |