

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

APR 09 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Chevron USA Inc</i>	API Number <i>30-026-32810</i>
Property Name <i>PJU</i>	Well No. <i>244</i>

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>B</i>	<i>6</i>	<i>18S</i>	<i>35E</i>	<i>10</i>	<i>N</i>	<i>1930</i>	<i>E</i>	<i>LRA</i>

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"/>	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE <i>4/9/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	$\emptyset$	<i>N/A</i>	<i>N/A</i>	$\emptyset$	<i>1900</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>CO2</i> <input checked="" type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>WTR</i> <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>GAS</i> <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.

*BS 4/10/2015*

Signature: <i>Tamer DeHaan</i>	OIL CONSERVATION DIVISION
Printed name: <i>Tamer DeHaan</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>4/9/15</i>	Phone:
Witness: <i>Don Brown</i>	

INSTRUCTIONS ON BACK OF THIS FORM

APR 14 2015