

JUN 30 2015

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <b>CHEVRON</b>		API Number <b>302502945</b> ✓
Property Name <b>CENTRAL VACUUM UNIT</b>		Well No. <b>35</b> ✓

Surface Location									
UL - Lot <b>M</b>	Section <b>35E</b>	Township <b>30S</b>	Range <b>17E</b>		Feet from <b>660</b>	N/S Line <b>5</b>	Feet From <b>660</b>	E/W Line <b>✓</b>	County <b>Lea</b>

**30 17S 35E**

Well Status

TA'D WELL YES	<input type="radio"/> NO	SHUT-IN YES	<input type="radio"/> NO	INJECTOR INJ	SWD	<input type="radio"/> OIL	PRODUCER GAS	DATE <b>6-25-15</b>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>0</b>		<b>120</b>	<b>380</b>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 <input type="checkbox"/>
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR <input checked="" type="checkbox"/>
Surges	Y / N	Y / N	Y / N	Y / N	GAS <input type="checkbox"/>
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of fluid injected for water test if applies.
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

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

**BS 7/2/2015**

Signature: <b>Jameson Evans</b>	OIL CONSERVATION DIVISION
Printed name: <b>JAMESON EVANS</b>	Entered into RBDMS
Title: <b>FIELD SPECIALIST A</b>	Re-test
Email Address: <b>LKKM @ CHEVRON.COM</b>	
Date: <b>6-25-15</b>	Phone: <b>575 734 2467</b>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

JUL 21 2015