HOBBS OCD

AUG 10 2015

RECEIVED

District I
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Phone: (575) 393-6161 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	API Number
Legacy	30-005-29150
Property Name	**Well No.**
Rock Queen Unit	306

Surface Location

UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
B	26	13S	31E		810	N	1990	E	Chaves

Well Status

TA'D WELL		SHUT-IN		INJECTOR		PRODUCER		DATE
YES	NO	YES	NO	INJ	SWD	OIL	GAS	7/30/15

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	N/A	N/A	80	1000
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 X
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ___
Surges	Y / N	Y / N	Y / N	Y / N	GAS ___
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid Injected for Waterflood 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 8/29/2015

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 7/30/15 Phone:	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 20 E