

AUG 20 2015

RECEIVED

District I
1625 N. French Dr., Hobbs, NM 88240
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 <i>Vanguard</i>	API Number <i>30-025-34497</i>
Property Name <i>SARAH Johnson</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>0</i>	Section <i>22</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>800</i>	N/S Line <i>S</i>	Feet From <i>2040</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO <i>(X)</i>	SHUT-IN YES	NO <i>(X)</i>	INJ	INJECTOR SWD	PRODUCER OIL <i>(X)</i>	GAS	DATE <i>8/10/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>150</i>	<i>150</i>
Flow Characteristics					<i>60</i>
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>___</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>___</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>___</i>
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.

Signature:	OIL CONSERVATION DIVISION
Printed name:	
Title:	
E-mail Address:	
Date: <i>8/10/15</i>	Entered into RBDMS
Phone:	Re-test
Witness: <i>George Brown</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015