

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

MAR 22 2017

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Oxy</i>				API Number <i>30-025-05556</i>				
Property Name <i>EAST EDMONT</i>						Well No. <i>14</i>		
Surface Location								
UL - Lot <i>A</i>	Section <i>4</i>	Township <i>19S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>FNL</i>	Feet From <i>1652</i>	E/W Line <i>FEL</i>	County <i>Lea</i>
Well Status								
YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJECTOR <i>NO</i>	SWD <i>NO</i>	OIL PRODUCER <i>660</i>	GAS	DATE <i>3/20/17</i>

OBSERVED DATA

	(A)Surface	(B)Interm 1	(C)Interm 2	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>300</i>
Flow Characteristics					
Pull	<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 injected or waterflooded if applies
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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

Small amount wtr - excess - bleed down to zero - gas

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Patrick Bente</i>	Entered into RBDMS
Title: <i>Production Tech</i>	Re-test
E-mail Address: <i>Patrick_Bente@oxy.com</i>	
Date: <i>3/20/17</i>	
Phone: <i>(575) 441-2744</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM