

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

HOBBS OCD

APR 27 2017

RECEIVED

Operator Name

API Number

ConocoPhillips Company	3002539657
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Well Name

Well No

East Vacuum GB-SA 3315	503W
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Surface Location

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
J	33	17S	35E	1840	S	2248	E	LEA

Well Status

TA'D WELL	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> INJ <input checked="" type="checkbox"/>	SWD <input type="checkbox"/> OIL <input type="checkbox"/>	GAS <input type="checkbox"/>	4-13-17

OBSERVED DATA

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure					1153
Flow Characteristics					CO2
Puff	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	WTR <input checked="" type="checkbox"/>
Steady Flow	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	GAS
Surges	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	
Down to Nothing	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	
Gas or Oil	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	
Water	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Y / N	Y / N	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	

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

(D) Puff for 5 sec.

Signature:	OIL CONSERVATION DIVISION
Print name: Alex Cardenas	Entered in RBDMS
Title: MSO	Re-test
E-mail Address: Alex.R.Cardenas@conocophillips.com	
Date: 4-13-17	
Phone: 575-704-2964	
Witness:	