

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

HOBBS C

AUG 10 2017

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Rice Operating</i>		API Number <i>30-025-04150</i> ✓
Property Name <i>EME SWD</i>		Well No. <i>#1</i> ✓

7. Surface Location

UL - Lot <i>I</i>	Section <i>1</i>	Township <i>20S</i>	Range <i>36E</i>	Feet from <i>2310</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJ INJECTOR ☐ PRODUCER ☒	OIL ☐ GAS ☐	DATE <i>8-8-17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<i>0</i>	<i>0</i>		<i>0</i>	<i>VAC</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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: <i>Israel Suarez</i>	OIL CONSERVATION DIVISION
Printed name: <i>Israel Suarez</i>	Entered into RBDMS
Title: <i>Foreman</i>	Re-test <i>PHZ</i>
E-mail Address: <i>isuares@rice-swd.com</i>	
Date: <i>8-9-17</i>	
Phone:	
Witness: <i>Shay Robinson</i>	

INSTRUCTIONS ON BACK OF THIS FORM

ck CSG
on mit