

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

BRADENHEAD TEST REPORT

Operator Name <i>Burgundy</i>		API Number <i>50-025-06176</i>
Property Name <i>Eunice Monument</i>		Well No. <i>413</i>

Surface Location

UL - Lot <i>Q</i>	Section <i>19</i>	Township <i>20S</i>	Range <i>37E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1920</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 ☒	INJECTOR ☒ INJ	SWD ☐	OIL ☐	PRODUCER ☐	GAS ☐	DATE <i>9-18-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>1600</i>
Flow Characteristics					
Puff	Y ☒ N	Y ☒ N	Y / N	Y ☒ N	CO2 ☐
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.

Signature: <i>Lindy Campbell</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Lindy Campbell</i>		Entered into RBDMS	
Title: <i>Prod. Acct.</i>		Re-test <i>[Signature]</i>	
E-mail Address: <i>ccampbell@burgundy-oil.com</i>			
Date: <i>9/18/19</i>	Phone: <i>432-1684-4033</i>		
Witness: <i>Larry Robinson</i>			

INSTRUCTIONS ON BACK OF THIS FORM