

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

DEC 10 2014

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>ConocoPhillips</i>		API Number <i>3002108063000</i>
Property Name <i>MCA</i>		Well No. <i>94</i>

Surface Location								
UL - Lot <i>P</i>	Section <i>20</i>	Township <i>17S</i>	Range <i>32E</i>	Feet from <i>660</i>	N/S Line <i>FSL</i>	Feet From <i>660</i>	E/W Line <i>FEL</i>	County <i>Lea</i>

Well Status			
TA'D WELL YES	<input type="radio"/> NO <input checked="" type="radio"/> YES	SHUT-IN NO	<input checked="" type="radio"/> INJECTOR <input type="radio"/> SWD
PRODUCER OIL		GAS	
			DATE <i>10-8-14</i>

OBSERVED DATA

	(A) Surface	(B) Interim 1	(C) Interim 2	(D) Prod Casing	(E) Tubing
Pressure				<i>Obs</i>	<i>1200/bs.</i>
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	CO2 <input checked="" type="checkbox"/>
Steady Flow	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	Level of Fluid Injected for Water/Gas if applicable
Gas or Oil	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	
Water	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	

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

*only inject water once per month.*

FOR RECORD ONLY

*BS 12/12/2014*

Signature: <i>Will White</i>	OIL CONSERVATION DIVISION
Printed name: <i>Will White</i>	Entered into RBDMS
Title: <i>Production Specialist</i>	Re-test
E-mail Address: <i>Will.L.White@conocophillips.com</i>	
Date: <i>10-8-14</i>	Phone: <i>575-322-0027</i>
Witness: <i>Chris Silva</i>	

DEC 16 2014