

District 2-Artesia Field Office
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(Fax) 575-748-9720
Submit 1 Copy

State of New Mexico
EMNRD-OIL CONSERVATION DIVISION

BRADENHEAD TEST REPORT

Operator Name <i>Ray Westfall Operating</i>		30 API Number <i>30-015 29104</i>
Property Name <i>Sand Hills SWD</i>		Well No. <i>1</i>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>0</i>	<i>31</i>	<i>17S</i>	<i>30E</i>	<i>660</i>	<i>S</i>	<i>2220</i>	<i>E</i>	<i>Eddy</i>

Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <i>NO</i>	YES <i>NO</i>	INJ <i>SWD</i>	OIL GAS	<i>9-22-20</i>

OBSERVED DATA

	(A) Surf-Interm.	(B) Interm. (1)	(C) Interm. (2)	(D) Prod Casing	(E) Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>0</i>	<i>1450</i>
Flow Characteristics	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>0</i>	
Puff	Y / N	Y / N	Y / <i>N</i>	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	If applicable type
Gas or Oil	Y / N	Y / N	Y / N	Y / N	fluid injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood

If Braden head flowed water, check all the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: Please state for each string (A, B, C, D, E) pertinent information regarding bleed down or continuous build up if applies.

Accepted for record test not witnessed
NMOCD DS 10-20-2020

Signature: <i>René Hope</i>	OIL CONSERVATION DIVISION
Print name: <i>René Hope</i>	Recorded online:
Title: <i>Office Manager</i>	Re-test:
E-mail Address:	Phone #: <i>677-2370</i>
Date: <i>9/23/20</i>	Witness: <i>[Signature]</i>