

District 2-Artesia Field Office 811 S. 1 <sup>st</sup> Street Artesia, NM 88210 (Office) 575-748-1283 (Fax) 575-748-9720 Submit 1 Copy	<b>State of New Mexico</b> <b>EMNRD-OIL CONSERVATION DIVISION</b>
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**BRADENHEAD TEST REPORT**

<b>Operator Name</b> Trinity Environmental SWD 1, LLC	<sup>30</sup> <b>API Number</b> 30-016-21748
<b>Property Name</b> GREEN A FED	<b>Well No.</b> #1

<sup>7</sup> **Surface Location**

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
K	29	17S	29E	1980	S	1980	W	EDDY

**Well Status**

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES NO	YES NO	INJ SWD YES	OIL GAS	11-4-2020

**OBSERVED DATA**

	(A) Surf-Interm.	(B) Interm. (1)	(C) Interm. (2)	(D) Prod Casing	(E) Tubing
Pressure	0	N/A	N/A	0	525 PSI SHUT IN
<u>Flow Characteristics</u>					
Puff	Y/ N ✓	Y/ N	Y/ N	Y/ N ✓	CO <sub>2</sub> _____
Steady Flow	Y/ N ✓	Y/ N	Y/ N	Y/ N ✓	WTR <u>  X  </u>
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.  
**NO PRESSURE ON CASING.**

Accepted for recorded test not witnessed  
 NMOCD DS 12-1-2020

Signature: <i>Kevin W. Rogers</i>	<b>OIL CONSERVATION DIVISION</b>
Print name: Kevin W. Rogers	Recorded online:
Title: Operations Manager	Re-test:
E-mail Address: kevin.rogers@trinityenv.com	Phone #: 575-200-7896
Date: 11-5-2020	Witness: