



**NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE
1600 RIO BRAZOS ROAD
AZTEC NM 87410
(505) 334-6178 FAX: (505) 334-6170
<http://www.nm.gov/ocd/District%203/district.htm>

BRADENHEAD TEST REPORT

(submit 1 copy to above address)

Date of Test 9-7-14 Operator Phoenix Hydro API #30-0 45-23461

Property Name Fed J1 Well No. A Location: Unit 1 Section 11 Township 27 Range 8

Well Status (Shut-In or Producing) Initial PSI: Tubing 10 Intermediate NA Casing 78 Bradenhead 5

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

Testing TIME	PRESSURE				
	Bradenhead			INTERM	
	BH	Int	Csg	Int	Csg
5 min	0		78		
10 min	0		78		
15 min	0		78		
20 min	0		78		
25 min	0		78		
30 min	0		78		

	FLOW CHARACTERISTICS	
	BRADENHEAD	INTERMEDIATE
Steady Flow		
Surges		
Down to Nothing <input checked="" type="checkbox"/>		OIL CONS. DIV DIST. 3
Nothing		NOV 03 2016
Gas <input checked="" type="checkbox"/>		
Gas & Water		
Water		

If bradenhead flowed water, check all of the descriptions that apply below:

CLEAR FRESH SALTY SULFUR BLACK

5 MINUTE SHUT-IN PRESSURE BRADENHEAD 0 INTERMEDIATE _____

REMARKS:

By Chad Turner

Witness _____

(Position)

E-mail address _____



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OIL CONS. DIV DIST. 3

FEB 04 2016

BRADENHEAD TEST REPORT

(submit 1 copy to above address)

Date of Test 8-5-15 Operator Phoenix HyGeo API #30-0 45-23461
Property Name FED J Well No. 1A Location: Unit 1 Section 11 Township 27 Range 8
Well Status (Shut-In or Producing) Initial PSI: Tubing 18 Intermediate NA Casing 60 Bradenhead 0

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

Testing	PRESSURE				
	Bradenhead			INTERM	
	BH	Int	Csg	Int	Csg
TIME					
5 min					
10 min					
15 min					
20 min					
25 min					
30 min					

	FLOW CHARACTERISTICS	
	BRADENHEAD	INTERMEDIATE
Steady Flow		
Surges		
Down to Nothing		
Nothing	<input checked="" type="checkbox"/>	
Gas		
Gas & Water		
Water		

If bradenhead flowed water, check all of the descriptions that apply below:

CLEAR _____ FRESH _____ SALTY _____ SULFUR _____ BLACK _____

5 MINUTE SHUT-IN PRESSURE BRADENHEAD 0 INTERMEDIATE _____

REMARKS:

By [Signature] Witness _____

(Position)

E-mail address _____