

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

BRADENHEAD TEST REPORT

Operator Name <i>Chevron</i>		API Number <i>30-025-02204</i>
Property Name <i>West Vacuum</i>		Well No. <i>36</i>

Surface Location

UL - Lot <i>0</i>	Section <i>34</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES <i>/</i> NO <i>/</i>	SHUT-IN YES NO <i>/</i>	INJECTOR <i>INJ</i>	SWD	OIL PRODUCER OIL GAS	DATE <i>4/26/18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>500</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>500</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if
					applies

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

Signature: <i>Eddie Galt</i>	OIL CONSERVATION DIVISION
Printed name: <i>EDDIE GALT</i>	Entered into RBDMS
Title: <i>SSR</i>	Re-test <i>/</i>
E-mail Address: <i>elvie@chevron.com</i>	
Date: <i>4/26/18</i>	
Phone: <i>575-441-4428</i>	
Witness: <i>Boone</i>	

INSTRUCTIONS ON BACK OF THIS FORM