

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

FEB 25 2019

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <b>MAS Operating</b>		API Number <b>30-025-1082</b> <b>12580</b> ✓	
Property Name <b>BV Lynch A Fed.</b>		Well No. <b>#10</b> ✓	

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<b>C</b>	<b>34</b>	<b>20S</b>	<b>34E</b>	<b>660</b>	<b>N</b>	<b>1980</b>	<b>W</b>	<b>LEA</b> ✓

Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR INJ <input type="radio"/> SWD <input checked="" type="radio"/>	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE <b>2-25-19</b> ✓
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<b>n/a</b>	<b>n/a</b>	<b>n/a</b>	<b>0</b>	<b>VAC</b>
Flow Characteristics					
Pull	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	CO2 <input type="checkbox"/>
Steady Flow	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	WTR <input checked="" type="checkbox"/>
Surges	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	GAS <input type="checkbox"/>
Down to nothing	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	Type of Fluid Injected for Waterflood if applies
Gas or Oil	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	
Water	Y/N	Y/N	Y/N	Y/N <input checked="" type="radio"/>	

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

**Loaded Prod. csg. w/ 12 BBL - Prod. csg. then went ON VAC.**  
**Failed MST Rule: 19.15.26.11**

Signature: <b>[Signature]</b>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS <b>[Signature]</b>
Title:	Re-test
E-mail Address:	
Date:	
Phone:	
Witness: <b>[Signature]</b>	