

District I  
 1625 N French Dr., Hobbs, NM 88240  
 Phone (575) 393-6161 Fax (575) 393-0720

**HOBBS OCD**

**JUN 17 2019**

**RECEIVED**

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

**BRADENHEAD TEST REPORT**

Operator Name Chevron Midcontinent, LP		API Number 30-025-23880
Property Name North Vacuum ABO West Unit		Well No. 019

**Surface Location**

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
J	28	17S	34E	2104	S	1856	E	Lea

**Well Status**

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input checked="" type="radio"/> NO	YES <input checked="" type="radio"/> NO	INJ SWD	<input checked="" type="radio"/> OIL GAS	4/30/19

**OBSERVED DATA**

	(A) Surf. Interm	(B) Interm(1)	(C) Interm(2)	(D) Prod. C.sng	(E) Tubing
Pressure				35	220
Flow Characteristics		N/A	N/A		
Puff	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	CO2 _____
Steady Flow	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	WTR _____
Surges	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	GAS _____
Down to nothing	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	If applicable type
Gas or Oil	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	fluid injected for
Water	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	Waterflood

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

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