

AUG 18 2020

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

**RECEIVED**

**BRADENHEAD TEST REPORT**

Operator Name <b>Apache Oil Corp.</b>		API Number <b>30-025-40846</b>
Property Name <b>North East Drinkard Unit (NEDU)</b>		Well No. <b>174</b>

**Surface Location**

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<b>C</b>	<b>3</b>	<b>21S</b>	<b>37E</b>	<b>3220</b>	<b>N</b>	<b>2605</b>	<b>W</b>	<b>Lea</b>

**Well Status**

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <b>3-2-20</b>
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**OBSERVED DATA**

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<b>1175</b>
Flow Characteristics					
Puff	<input checked="" type="radio"/> N	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	<input checked="" type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	WTR <input checked="" type="checkbox"/>
Surges	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> N	Y/N	Y/N	<input checked="" type="radio"/> N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	
Water	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/ <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.

Signature: <b>Tracy Cole</b>	OIL CONSERVATION DIVISION
Printed name: <b>Tracy Cole</b>	Entered into RBDMS
Title:	Re-test <b>[Signature]</b>
E-mail Address:	
Date:	Phone: <b>575-441-5196</b>
Witness:	