

District 2 Artesia

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

**BRADENHEAD TEST REPORT**

<b>Operator Name</b> OXY USA WTP LIMITED PARTNERSHIP	<b>API Number</b> 30-015-44517
<b>Property Name</b> TURKEY TRACK 4 3 STATE	<b>Well No.</b> 23H

**1. Surface Location**

UL - Lot L	Section 4	Township 19S	Range 29E		Feet from 1660	N/S Line S	Feet From 360	E/W Line W	County EDDY
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**Well Status**

<b>TA'D WELL</b> YES	<b>X NO</b>	<b>SHUT-IN</b> YES	<b>X NO</b>	<b>INJ</b>	<b>INJECTOR</b> SWD	<b>PRODUCER</b> OIL	<b>GAS</b>	<b>DATE</b> 07-31-23
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**OBSERVED DATA**

	<u>(A)Surface</u>	<u>(B)Interm(1)</u>	<u>(C)Interm(2)</u>	<u>(D)Prod Csg</u>	<u>(E)Tubing</u>
<b>Pressure</b>	0	0		847	157
<b><u>Flow Characteristics</u></b>					
<b>Puff</b>	Y / N X	Y / N X	Y / N	Y / N	<b>CO2</b> ____ <b>WTR</b> ____ <b>GAS</b> ____ <small>Type of Fluid Injected for Waterflood if applies</small>
<b>Steady Flow</b>	Y / N X	Y / N X	Y / N	Y / N	
<b>Surges</b>	Y / N X	Y / N X	Y / N	Y / N	
<b>Down to nothing</b>	Y / N X	Y / N X	Y / N	Y / N	
<b>Gas or Oil</b>	Y / N X	Y / N X	Y / N	Y / N	
<b>Water</b>	Y / N X	Y / N X	Y / N	Y / N	

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

A: NO RECORDABLE PRESSURE

B: NO RECORDABLE PRESSURE

<b>Signature:</b> MOISES JAQUEZ	<b>OIL CONSERVATION DIVISION</b>
<b>Printed name:</b> MOISES JAQUEZ	<b>Entered into RBDMS</b>
<b>Title:</b> WORKOVER AND COMPLETIONS SPECIALIST	<b>Re-test</b>
<b>E-mail Address:</b> MOISES_JAQUEZ@OXY.COM	
<b>Date:</b> 07-31-23	<b>Phone:</b> (575) 408 - 6137
<b>Witness:</b> FABIAN HERNANDEZ - HOT OILER OP CONDUCTING MIT	

432-888-0211

INSTRUCTIONS ON BACK OF THIS FORM







**PERFORMING BRADENHEAD TEST**

## General Procedure for Bradenhead Test

Identify: All valves prior to testing

Gauges: Install on each casing string to record pressure.

Assure: That all valves are in good working condition and **closed at least 24 hours prior to testing.**

Open: Each valve (Bradenhead, intermediate and casing valves) is to be opened separately.

Check Gauges: Record pressure on each gauge and casing string on BHT form. Open valves to atmosphere and record results on BHT form.

Designate what applies to the result of opening the valves for each string:

- |                        |           |
|------------------------|-----------|
| • Blow or Puff         | Yes or No |
| • Bled down to Nothing | Yes or No |
| • Steady Flow          | Yes or No |
| • Oil or Gas           | Yes or No |
| • Water                | Yes or No |

Start: Injection or SWD pump so tubing pressure can be read.

Instructions below apply to the District 2 Artesia office since this must be reported on a form. In case of pressure:

1. Record pressure reading on gauge.
2. Bleed and note time elapsed to bleed down.
3. Leave valve open for additional observation.
4. Note any fluids expelled.

In absence of Pressure:

1. Leave valve open for additional observation.
2. Note types of fluids expelled.
3. Note if fluids persist throughout test.

Note: Tubing pressure on injection or SWD wells.

Test will be signed by person performing test with a contact phone number.

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/oed/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 253026

CONDITIONS

Operator: OXY USA WTP LIMITED PARTNERSHIP P.O. Box 4294 Houston, TX 772104294	OGRID: 192463
	Action Number: 253026
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

CONDITIONS

Created By	Condition	Condition Date
timothy.martin	None	11/27/2024