

District 2-Artesia Field Office
811 S. 1st Street
Artesia, NM 88210
(Office) 575-748-1283
(Fax) 575-748-9720
Submit 1 Copy

State of New Mexico
EMNRD-OIL CONSERVATION DIVISION

BRADENHEAD TEST REPORT

Operator Name <i>Ray Westall operations</i>	³⁰ API Number <i>30-015-24655</i>
Property Name <i>Two Forks State #1 SWD</i>	Well No. <i>#1</i>

⁷ Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>B</i>	<i>2</i>	<i>18s</i>	<i>28e</i>	<i>660</i>	<i>FNL</i>	<i>2090</i>	<i>FEL</i>	<i>Eddy</i>

Well Status

TA'D Well		SHUT-IN		INJECTOR		PRODUCER		DATE
YES	NO	YES	NO	INJ	<i>(SWD)</i>	OIL	GAS	<i>8-14-2020</i>

OBSERVED DATA

	(A) Surf-Interm.	(B) Interm. (1)	(C) Interm. (2)	(D) Prod Casing	(E) Tubing
Pressure			<i>0</i>	<i>0</i>	<i>1390</i>
Flow Characteristics					
Puff	Y / N	Y / N	Y / <i>(X)</i>	Y / <i>(X)</i>	CO2 _____
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR _____
Surges	Y / N	Y / N	Y / N	Y / N	GAS _____
Down to nothing	Y / N	Y / N	Y / N	Y / N	If applicable type
Gas or Oil	Y / N	Y / N	Y / N	Y / N	fluid injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood

If Braden head flowed water, check all the descriptions that apply:

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

Accepted for recorded test not witnessed

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Print name:	Recorded online:
Title:	Re-test:
E-mail Address:	Phone #:
Date: <i>9/23/20</i>	Witness: