

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

DEC 10 2014

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>ConocoPhillips</i>		API Number <i>30021080630001</i>	
Property Name <i>MCA</i>		Well No. <i>94</i>	

Surface Location

UL - Lot <i>P</i>	Section <i>20</i>	Township <i>17S</i>	Range <i>32E</i>	Feet from <i>660</i>	N/S Line <i>P/S</i>	Feet From <i>660</i>	E/W Line <i>FEL</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	-------------------------	------------------------	-------------------------	------------------------	----------------------

Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN NO ☐ YES ☒	INJECTOR NO ☒ YES ☐	SWD ☒	OIL ☐	PRODUCER GAS ☐	DATE <i>10-8-14</i>
--	--	---	--	---------------------------------	--	------------------------

OBSERVED DATA

	(A) Surface	(B) Interml 1	(C) Interml 2	(D) Prod Casing	(E) Tubing
Pressure				<i>0/b</i>	<i>1200/b</i>
Flow Characteristics					
Puff	☒ Y ☐ N	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	CO2 ☒
Steady Flow	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	WTR ☒
Burges	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	GAS ☐
Down to nothing	☒ Y ☐ N	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	Time of Fluid Isolated for Waterflood if applies
Gas or Oil	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	☐ Y ☒ N	
Water	☐ Y ☒ N	☐ Y ☒ N	☐ 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.

only inject water once per month.

FOR RECORD ONLY

BS 12/12/2014

Signature: <i>Will White</i>	OIL CONSERVATION DIVISION
Printed name: <i>Will White</i>	Entered into RBDMS
Title: <i>Production Specialist</i>	Re-test
E-mail Address: <i>Will.L.White@conocoPhillips.com</i>	
Date: <i>10-8-14</i>	
Phone: <i>575-322-0027</i>	
Witness: <i>Chris Silva</i>	

DEC 17 2014