

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

BRADENHEAD TEST REPORT

Operator Name <i>m. bowan</i>	API Number <i>30-025-28054</i>
Property Name <i>STATE 35</i>	Well No. <i>4</i>

Surface Location									
UL - Lot <i>E</i>	Section <i>35</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>1330</i>	N/S Line <i>N</i>	Feet From <i>110</i>	E/W Line <i>W</i>	County <i>LCA</i>	

Well Status									
TA'D WELL <i>YES</i>	NO	SHUT-IN <i>YES</i>	NO	INJECTOR <i>INJ</i>	SWD	PRODUCER <i>OIL</i>	GAS	DATE <i>2/24/15</i>	

OBSERVED DATA

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

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

STA Expired 10/31/2011
Inactive 251 months / GAS/OCD
Letter of Violation 2/26/15

BS 2/25/2015

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>2/24/15</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

FEC 26 2015