

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

BRADENHEAD TEST REPORT

Operator Name <i>McGowan</i>				API Number <i>30-025-28428</i>			
Property Name <i>Bridges St</i>						Well No. <i>187</i>	
Surface Location							
UL - Lot <i>0</i>	Section <i>26</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>5</i>	N/S Line <i>S</i>	Feet From <i>2550</i>	E/W Line <i>E</i>
							County <i>Lea</i>

Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☒ YES ☐ NO	INJECTOR ☒ IN ☐ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <i>2/24/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>N/A</i>	<i>N/A</i>	<i>Ø</i>	<i>Ø</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 ☐
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 Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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

*9A Expired 10/31/2011.
Inactive 188 months.
Letter of Violation 2/26/15
LAD/CCD.*

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>James Bowe</i>	

INSTRUCTIONS ON BACK OF THIS FORM

FEB 26 2015