

MAY 05 2015

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-6720

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Chevron</i>	API Number <i>30-025-26444</i>
Property Name <i>Central DANKAND</i>	Well No. <i>425</i>

2. Surface Location

UL - Lat <i>G</i>	Section <i>28</i>	Township <i>21S</i>	Range <i>37E</i>	Feet from <i>2310</i>	N/S Line <i>N</i>	Feet from <i>2310</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

YES	TA'D WELL	NO	YES	SHUT-IN	NO	INJ	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>φ</i>	<i>2 1/4</i>	<i>2 1/4</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>___</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>___</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>___</i>
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.

Signature: <i>Joseph Collins</i>	OIL CONSERVATION DIVISION
Printed name: <i>Joseph Collins</i>	Entered into RBDMS
Title: <i>Production Specialist Sub Surface</i>	Re-test
E-mail Address: <i>Collins30@chevron.com</i>	
Date: <i>4/29/15</i>	Phone: <i>575-631-4197</i>
Witness: <i>John Dowd</i>	

INSTRUCTIONS ON BACK OF THIS FORM

MAY 07 2015