

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

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corp</i>	API Number <i>30-025-05794</i>
Property Name <i>NMGSAU</i>	Well No. <i>1004</i>

7. Surface Location

UT. - Lot <i>N</i>	Section <i>32</i>	Township <i>17S</i>	Range <i>31E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>W</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 <i>5-5-15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>20</i>			<i>P</i>	<i>1020</i>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	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	☒ N	Y / N	Y / N	☒ N	Type of Fluid
Gas or Oil	☒ N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflow if applies

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

FOR RECORD ONLY

BS 5/22/2015

Signature: <i>Jim Ellison</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jim Ellison</i>	Entered into RBDMS
Title: <i>Instrument Tech</i>	Re-test
E-mail Address: <i>J.D.Ellison @ apache corp. com</i>	
Date:	Phone: <i>575-441-7734</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAY 27 2015

[Signature]