

HOBBS OCD

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

JUL 01 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Chevron USA Inc</i>	API Number <i>30-025-02282</i>
Property Name <i>WVH</i>	Well No <i>46</i>

Surface Location

VL - Lot <i>A</i>	Section <i>3</i>	Township <i>18</i>	Range <i>34</i>	Feet from <i>i</i>	Feet from <i>660</i>	N-S Line <i>N</i>	Feet from <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO	SHIFT-IN YES ☒ NO	INJECTOR INJ ☐ SWD ☐	PRODUCER ☒ OIL ☐ GAS	DATE <i>6-6-15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	---	---	<i>50</i>	<i>400</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.

BS 7/9/2015

Signature

Linda Robinson

Printed name

Linda Robinson

Title

Field Specialist

Company Address

Chevron USA Inc

Date

6-6-15

OIL CONSERVATION DIVISION

HOBBBS DISTRICT OFFICE

JUL 14 2015