

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

JUL 07 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>McGOWAN WORKING PARTNERS INC.</i>	API Number <i>39025280540000 -</i>
Property Name <i>STATE 35 UNIT</i>	Well No. <i>004 -</i>

7. Surface Location

UL - Lot <i>E</i>	Section <i>35</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>1330</i>	NS Line <i>N</i>	Feet From <i>110</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☒ YES ☐ NO	INJECTOR ☒ INJ ☐ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <i>2-24-2015</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>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 ☐ WTR ☒ GAS ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applies.
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
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 7/14/2015

Signature: <i>Jack Stevenson</i>	OIL CONSERVATION DIVISION
Printed name: <i>JACK STEVENSON</i>	Entered into RBDMS
Title: <i>PUMPER</i>	Re-test
E-mail Address:	
Date: <i>2-24-2015</i>	Phone: <i>575-631-1083</i>
Witness: <i>George Bower</i>	

JUL 23 2015