

JUL 27 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Cherven</i>	API Number <i>3002535817</i>
Property Name <i>TIBAU</i>	Well No. <i>4H</i>

Surface Location									
UL - Lot <i>I</i>	Section <i>22</i>	Township <i>12S</i>	Range <i>38E</i>		Feet from <i>2310</i>	N/S Line <i>FSL</i>	Feet From <i>1210</i>	E/W Line <i>FEL</i>	County <i>Lea</i>

Well Status							
TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJECTOR ☒	SWD	OIL	PRODUCER	GAS	DATE <i>7/10/15</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>21A</i>	<i>0</i>	<i>1000</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
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.

Int- Blow on strong Puff @ 30 sec down to zero.

BS 7/29/2015

Signature: <i>Eckel</i>	OIL CONSERVATION DIVISION
Printed name: <i>EDWARD GARCIA</i>	Entered into RBDMS
Title: <i>SSPS</i>	Re-test
E-mail Address: <i>ENG@Cherven</i>	
Date: <i>7/10/15</i>	Phone: <i>575-631-8516</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

JUL 31 2015