

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

JUL 27 2015

BRADENHEAD TEST REPORT

Operator Name

API Number 37168

Property Name

Well No.

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<u>D</u>	<u>20</u>	<u>22S</u>	<u>37E</u>	<u>330</u>	<u>N</u>	<u>660</u>	<u>W</u>	<u>Lea</u>

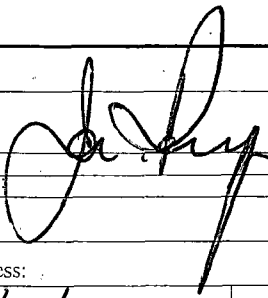
Well-Status

TA'D WELL	SHUT-IN	INJECTOR	OIL PRODUCER	DATE
YES ☒ NO ☐	YES ☐ NO ☒	INJ ☐ SWD ☒	GAS ☐	<u>7/20/15</u>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	ϕ	ϕ	<u>N/A</u>	ϕ	<u>VAC</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>—</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>X</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>—</u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Water flood 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: 	<u>BS 8/20/2015</u>
Printed name:	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS <u>JS</u>
E-mail Address:	Re-test
Date: <u>7/20/15</u>	
Phone:	
Witness: <u>John Sawyer</u>	

INSTRUCTIONS ON BACK OF THIS FORM

AUG 28 2015