

AUG 13 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Cherron USA Inc</i>	API Number <i>3002531995</i>
Property Name <i>Nest Dollarhide Drinkard</i>	Well No. <i>ADDN 131</i>

1. Surface Location

UL Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>H</i>	<i>32</i>	<i>24S</i>	<i>30E</i>	<i>2150</i>	<i>N</i>	<i>850</i>	<i>E</i>	<i>Lea</i>

Well Status

TA'D WELL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJECTOR <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PRODUCER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE <i>7/28/2015</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<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 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
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.

Signature: <i>Austin Stringfeller</i>	OIL CONSERVATION DIVISION
Printed name: <i>Austin Stringfeller</i>	Entered into RBDMS
Title: <i>Field specialist</i>	Re-test
E-mail Address: <i>ETVP@Chevron.com</i>	
Date: <i>7/28/2015</i>	Phone: <i>432-215-8802</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

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