

AUG 13 2015

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

RECEIVED
13.2

BRADENHEAD TEST REPORT

Operator Name <i>Stephens & Johnson Operating Co.</i>		API Number <i>300-25-05158</i>	
Property Name <i>Wester North Wolfcamp Unit</i>		Well No. <i>Trail 13 well No. 2</i>	

Surface Location									
UL - Lot <i>A</i>	Section <i>27</i>	Township <i>14S</i>	Range <i>37E</i>		Feet from <i>560</i>	N/S Line <i>South</i>	Feet from <i>660</i>	E/W Line <i>East</i>	County <i>Lea</i>

Well Status									
TA'D WELL YES	<i>NO</i>	SHUT-IN YES	<i>NO</i>	<i>INJ</i>	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>8-3-15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>			<i>20</i>	<i>2400</i>
Flow Characteristics	<i>no flow</i>				
Puff	Y / N	Y / N	Y / N	<i>Y</i> / N	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ☒
Surges	Y / N	Y / N	Y / N	Y / N	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	<i>Y</i> / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	<i>Y</i> / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	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>Michael H. Petrek</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Michael H. PETREK</i>		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <i>8-3-2015</i>	Phone: <i>432-634-0386</i>		
Witness: <i>Bil Samama</i>			

BB 8/29/2015

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015