

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

AUG 21 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Breck</i>	API Number <i>30-025-08986</i>
Property Name <i>Sarah Eunice</i>	Well No. <i>20</i>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>1</i>	<i>21</i>	<i>22S</i>	<i>36E</i>	<i>1980</i>	<i>S</i>	<i>660</i>	<i>E</i>	<i>LCA</i>

Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	OIL	PRODUCER GAS	DATE <i>8/20/15</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>N/A</i>	<i>N/A</i>	<i>0</i>	<i>400</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 Injected for Waterflood if applies.
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.

Signature: <i>Kevin Breckel</i>	<i>BS 8/20/2015</i>
Printed name: Kevin Breckel	OIL CONSERVATION DIVISION
Title: Production Superintendent	Entered into RBDMS
E-mail Address: <i>kbreckel@breckop.com / mesquite@valornet.com</i>	Re-test
Date: <i>8/20/15</i>	
Phone: (254) 559-0881	
Witness: <i>Dean Dow</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015