

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

AUG 07 2015

RECEIVED

BRADENHEAD TEST REPORT

Operator Name ✓ <u>Chevron</u>	*API Number <u>3002536342</u>
Property Name ✓ <u>Central Vacuum Unit</u>	Well No. <u>163</u>

7. Surface Location

UL - Lot ✓ <u>#</u>	Section <u>31</u>	Township <u>71S</u>	Range <u>35E</u>	Feet from <u>2050</u>	N/S Line <u>N</u>	Feet from <u>1014</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well Status

TA'D WELL ✓ YES	☒ NO	YES	SHUT-IN ☒ NO	INJ	INJECTOR	SWD	☒ OIL	PRODUCER	GAS	DATE <u>7-16-15</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>30</u>			<u>350</u>	<u>306</u>
Flow Characteristics					
Puff	☒ Y / N	Y / N	Y / N	Y / N	CO2 <u><</u>
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR <u>></u>
Surges	Y / N	Y / N	Y / N	Y / N	GAS <u>—</u>
Down to nothing	☒ Y / N	Y / N	Y / N	Y / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<u>gas</u> ☒ Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Surface Blew down to 0 in 10 seconds

Signature: <u>[Signature]</u>	<u>B8 8/30/2015</u> OIL CONSERVATION DIVISION
Printed name: <u>Daniel Pace</u>	Entered into RBDMS
Title: <u>FSA</u>	Re-test
E-mail Address: <u>DQKB@Chevron.com</u>	
Date: <u>7-16-15</u>	Phone: <u>575-704-2365</u>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015