

AUG 28 2015

District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

RECEIVE

BRADENHEAD TEST REPORT

Operator Name <i>EOR Operating</i>		API Number <i>30-041-00255</i>	
Property Name <i>Milnesand SA Unit</i>		Well No. <i>#58</i>	

Surface Location

UL - Lot <i>A</i>	Section <i>13</i>	Township <i>18S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Roosevelt</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN ☒ YES	NO	INJECTOR ☒ INJ	SWD	PRODUCER OIL	GAS	DATE <i>5-28-15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>-0-</i>	<i>-0-</i>		<i>-50 psi</i>	<i>-0-</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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.

*Production casing has 50 psi of gas pressure (NO Fluid)
Gas pressure will bleed down to nothing in 25 minutes.*

BS 9/15/2015

Signature: <i>Matt Howell</i>		OIL CONSERVATION DIVISION	
Printed name: <i>MA + + Howell</i>		Entered into RBDMS	
Title: <i>Lease Operator</i>		Re-test	
E-mail Address: <i>mhowell@enhancedoiltres.com</i>			
Date: <i>5-28-15</i>	Phone: <i>575-607-5947</i>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM

SEP 16 2015

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