

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

BRADENHEAD TEST REPORT

Operator Name <i>Newbourne Oil Company</i>		API Number <i>30-025-23492-00-00</i>
Property Name <i>QPQASH</i>		Well No. <i>25</i>

7. Surface Location

UL - Lot <i>H</i>	Section <i>27</i>	Township <i>19S</i>	Range <i>32E</i>	Feet from <i>1650</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	NO	INJECTOR <input checked="" type="radio"/> NO	SWD	OIL	PRODUCER GAS	DATE <i>08/28/15</i>
------------------	-------------------------------------	----------------	----	---	-----	-----	-----------------	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0 #</i>			<i>0 #</i>	<i>1500 #</i>
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	
Water	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	

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

NM OIL CONSERVATION
ARTESIA DISTRICT

SEP 02 2015

RECEIVED

BS 9/16/2015

Signature: <i>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Cade Carter</i>		Entered into RBDMS	
Title: <i>Production Engineer</i>		Re-test	
E-mail Address: <i>ccarter@newbourne.com</i>			
Date: <i>08/28/15</i>	Phone: <i>575-390-6155</i>		
Witness: <i>[Signature]</i>			

INSTRUCTIONS ON BACK OF THIS FORM

SEP 18 2015