

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

BRADENHEAD TEST REPORT

Operator Name <i>Dugan Production</i>		API Number <i>30-005-10524</i>	
Property Name <i>Km Chaveron</i>		Well No. <i>110</i>	

Surface Location

UL - Lot <i>N</i>	Section <i>2</i>	Township <i>8S</i>	Range <i>33E</i>	Feet from <i>990</i>	NS Line <i>5</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>Chaves</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <i>INJ</i>	SWD	OIL	PRODUCER	GAS	DATE <i>9/28/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	ϕ	<i>N/A</i>	<i>N/A</i>	ϕ	ϕ
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 <i>X</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS
Down to nothing	<i>N/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	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>Rainey McKay</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Rainey McKay</i>		Entered into RBDMS	
Title: <i>Pumper</i>		Re-test	
E-mail Address:			
Date: <i>9/28/15</i>	Phone:		
Witness: <i>[Signature]</i>			

OCT 08 2015