

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

OCT 16 2015

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Apache Oil Corp.</i>		API Number <i>30-025-06747</i>	
Property Name <i>NEDU</i>		Well No. <i>909</i>	

Surface Location

UT. - Lot <i>1</i>	Section <i>22</i>	Township <i>21S</i>	Range <i>37E</i>	Feet from <i>1980</i>	NS Line <i>N</i>	Feet From <i>660</i>	EW Line <i>E</i>	County <i>Lea</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>10-7-15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>Ø</i>	<i>Ø</i>		<i>Ø</i>	<i>1150</i>
Flow Characteristics					
Puff	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>N</i>	CO2 <i>—</i>
Steady Flow	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>N</i>	WTR <i>✓</i>
Surges	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>N</i>	GAS <i>—</i>
Down to nothing	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>N</i>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>N</i>	
Water	Y / <i>N</i>	Y / <i>N</i>	Y / N	Y / <i>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>Tracy Cole</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Tracy Cole</i>		Entered into RBDMS <i>B8</i>	
Title: <i>Pumper</i>		Re-test	
E-mail Address: <i>tracy.cole@apache.corp.com</i>			
Date: <i>10-7-15</i>	Phone:		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM

OCT 20 2015