

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

OCT 19 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>midland</i>	API Number <i>30-025-23310</i>
Property Name <i>Longie matrix Woodworth</i>	Well No. <i>710</i>

7. Surface Location

UL - Lot <i>H</i>	Section <i>27</i>	Township <i>24</i>	Range <i>37</i>	Feet from <i>1950</i>	N/S Line <i>N</i>	Feet From <i>50</i>	E/W Line <i>E</i>	County <i>LCA</i>
----------------------	----------------------	-----------------------	--------------------	--------------------------	----------------------	------------------------	----------------------	----------------------

Well Status

TA'D WELL <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER <input type="radio"/> OIL <input type="radio"/> GAS	DATE <i>10/19/15</i>
--	--	--	---	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>200</i>
Flow Characteristics					
Puff	<i>Y/DN</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
Down to nothing	<i>Y/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>C. Robinson</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cam Robinson</i>	Entered into RBDMS <i>LB</i>
Title:	Re-test
E-mail Address:	
Date: <i>10/19/15</i>	Phone:
Witness: <i>John Dower</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 28 2015