

HOBBS OCD

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

OCT 26 2015

BRADENHEAD TEST REPORT

RECEIVED
API Number

Operator Name <i>Sovereign Eagle</i>	API Number <i>30-041-20840</i>
Property Name <i>Powell SWD Pen</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>6</i>	Section <i>23</i>	Township <i>25</i>	Range <i>29E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1980</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	OIL	PRODUCER GAS	DATE <i>10/26/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	$\emptyset$	$\emptyset$	<i>N/A</i>	$\emptyset$	<i>400</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 <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>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>Tom</i>	OIL CONSERVATION DIVISION	
Printed name: <i>Tom</i>	Entered into RBDMS	<i>GB</i>
Title: <i>Pumper</i>	Re-test	
E-mail Address:		
Date: <i>10/26/15</i>	Phone:	
	Witness: <i>John Brown</i>	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 04 2015

JB
FW