

NOV 10 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Conoco-Phillips</i>	* API Number <i>30-025-40482</i>
Property Name <i>Buck Fed 17</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>F</i>	Section <i>17</i>	Township <i>26S</i>	Range <i>32E</i>	Feet from <i>2284</i>	N/S Line <i>N</i>	Feet From <i>1950</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJ ☐	PRODUCER OIL ☒ GAS ☐	DATE <i>11/6/15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>1000</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 ☒
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>	Water-flood 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>B8 11/13/15</i>
Printed name:	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS <i>CB</i>
E-mail Address:	Re-test
Date: <i>11/6/15</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 18 2015