

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

BRADENHEAD TEST REPORT

Operator Name <u>VAGUARD</u>		API Number <u>30-025-29544</u>
Property Name <u>S TIVASON Fed</u>		Well No. <u>3</u>

Surface Location

UL - Lot <u>B</u>	Section <u>33</u>	Township <u>19S</u>	Range <u>34E</u>	Feet from <u>330</u>	N/S Line <u>N</u>	Feet From <u>1450</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well Status

TA'D WELL YES	<u>NO</u>	SHUT-IN YES	<u>NO</u>	INJECTOR INJ	<u>SWD</u>	OIL PRODUCER GAS	DATE <u>11/10/15</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>0</u>	<u>N/A</u>	<u>N/A</u>	<u>0</u>	<u>0</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>—</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>X</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>—</u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	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.

HOBBS OCD

NOV 13 2015

RECEIVED

B8 11/13/15

Signature: <u>Harvey A. - Pumper</u>		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS <u>GB</u>	
Title:		Re-test	
E-mail Address:			
Date: <u>11/10/15</u>	Phone:		
Witness: <u>[Signature]</u>			

INSTRUCTIONS ON BACK OF THIS FORM

NOV 18 2015