

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

BRADENHEAD TEST REPORT

Operator Name <i>Pyrote Water Systems</i>		API Number <i>30025077130000</i>
Property Name <i>AN ETZ</i>		Well No. <i>#1</i>

Surface Location *P-26-195-38E*

UL Lot <i>P</i>	Section <i>26</i>	Township <i>19</i>	Range <i>38</i>	Feet from <i>660</i>	NS Line <i>S</i>	East From <i>460</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ NO	INJECTOR <i>SWD</i>	OIL PRODUCER	GAS <i>DATE 8/1/14</i>
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OBSERVED DATA

	(A) Surface	(B) Interim (1)	(C) Interim (2)	(D) Prod Casing	(E) Tubing
Pressure					<i>100</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>	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.

Small puff on surface and casing

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jerry Burton</i>	Entered into RBDMS <i>BS</i>
Title: <i>NM Operations Manager PWS</i>	Re-test
E-mail Address: <i>audra@pyrotewatersystems.com</i>	
Date: <i>8/1/2014</i>	
Phone: <i>432-448-4917</i>	
Witness: <i>Bill Serouf</i>	