

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

NOV 18 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Chewon</i>	API Number <i>30-025-33599</i>
Property Name <i>West Vacuum</i>	Well No. <i>57</i>

Surface Location

UL - Lot <i>P</i>	Section <i>34</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>75</i>	N/S Line <i>S</i>	Feet From <i>1305</i>	E/W Line <i>E</i>	County <i>LRA</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	OIL PRODUCER GAS	DATE <i>11/18/15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>Ø</i>	<i>N/A</i>	<i>N/A</i>	<i>Ø</i>	<i>Ø</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
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 <i>—</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

BHT & MIT both time-passed

Signature: <i>C. Ortiz</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cruz Ortiz</i>	Entered into RBDMS <i>GB</i>
Title: <i>RWWSM</i>	Re-test
E-mail Address:	
Date: <i>11/18/15</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 20 2015

[Signature]