

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

BRADENHEAD TEST REPORT

Operator Name <i>Smith & Thomas</i>	API Number <i>30-025-30175</i>
Property Name <i>SARNAI QUEEN</i>	Well No. <i>2</i>

Surface Location

UL - Lot <i>L</i>	Section <i>1</i>	Township <i>17S</i>	Range <i>33E</i>	Feet from <i>1500</i>	N/S Line <i>S</i>	Feet From <i>990</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES	NO <input checked="" type="radio"/>	SHUT-IN YES	NO <input checked="" type="radio"/>	INJECTOR INJ <input checked="" type="radio"/>	SWB <input checked="" type="radio"/>	OIL PRODUCER	GAS	DATE <i>11/24/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgng	(E)Tubing
Pressure	ϕ	<i>N/A</i>	<i>N/A</i>	ϕ	ϕ
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
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.

BS 12/1/15

Signature: <i>Jesse Smith</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jesse Smith</i>	Entered into RBDMS <i>GB</i>
Title: <i>Jesse Smith</i>	Re-test
E-mail Address:	
Date: <i>11/24/15</i>	Phone:
Witness: <i>Jay Coon</i>	

INSTRUCTIONS ON BACK OF THIS FORM