

HOBBS OCD

DEC 01 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Lesacy Reservoir Corral LP</i>	* API Number <i>3002532179</i>
Property Name <i>SPAUV</i>	Well No. <i>71</i>

2. Surface Location

UL - Lot <i>N</i>	Section <i>34</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>990</i>	N/S Line <i>S</i>	Feet From <i>1950</i>	E/W Line <i>L</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR INJ ☐ SWD ☐	PRODUCER ☒ OIL ☐ GAS	DATE <i>6/17/15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>Q</i>	<i>Q</i>		<i>50</i>	<i>50</i>
Flow Characteristics					
Pull	☒ Y ☐ N	☒ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	CO2 ☐
Steady Flow	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	WTR ☐
Surges	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	GAS ☐
Down to nothing	☒ Y ☐ N	☒ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	Type of fluid injected for Waterflood if applies
Gas or Oil	☒ Y ☐ N	☒ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	
Water	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	

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

A-D gss

Signature: <i>Steve D. H. N. A.</i>	OIL CONSERVATION DIVISION
Printed name: <i>Steve D. H. N. A.</i>	Entered into RBDMS
Title: <i>Well Tech</i>	Re-test
E-mail Address:	
Date: <i>8/28/15</i>	Phone: <i>432 312 4757</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 09 2015

In RBDMS Conf