

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

DEC 09 2015

BRADENHEAD TEST REPORT

Operator Name <i>Seely</i>	API Number <i>30-025-01644</i>
Property Name <i>E.K. Queer</i>	Well No. <i>611</i>

Surface Location									
UL - Lot <i>2</i>	Section <i>24</i>	Township <i>18S</i>	Range <i>33E</i>	Feet from <i>2310</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>LCA</i>	

Well Status									
TA'D WELL ☒ YES ☒ NO	SHUT-IN ☒ YES ☒ NO	INJECTOR ☒ YES ☒ NO	SWD ☒ YES ☒ NO	OIL ☒ YES ☒ NO	PRODUCER ☒ YES ☒ NO	GAS ☒ YES ☒ NO	DATE <i>12/7/15</i>		

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>75</i>
Flow Characteristics					
Pull	<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 <i>X</i>
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 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.

Signature: <i>Steve Cligman</i>	<i>B8 12/9/15</i>
Printed name: <i>Steve Cligman</i>	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS <i>GB</i>
E-mail Address:	Re-test
Date: <i>12/7/15</i>	
Phone:	
Witness: <i>George Brown</i>	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 11 2015

IN
GB