

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

DEC 07 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>VANGUARD</i>	API Number <i>30-025-23116</i>
Property Name <i>ST. A</i>	Well No. <i>5</i>

2 Surface Location

UL - Lot <i>A</i>	Section <i>32</i>	Township <i>18S</i>	Range <i>38E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>LeA</i>
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Well Status

TA'D WELL YES	<i>NO</i>	SHUT-IN YES	NO	INJECTOR INJ	SWD	PRODUCER <i>OIL</i>	GAS	DATE <i>11/10/15</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>—</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.

Signature:	<i>AS 12/9/15</i>
Printed name:	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS <i>GB</i>
E-mail Address:	Re-test
Date: <i>11/10/15</i>	Phone:
Witness: <i>John Dorn</i>	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 11 2015