

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

DEC 10 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Lizay</i>	API Number <i>30-005-01117</i>
Property Name <i>W. Caprock Queen Unit</i>	Well No. <i>20</i>

Surface Location

UL - Lot <i>F</i>	Section <i>21</i>	Township <i>14S</i>	Range <i>31E</i>	Feet from <i>1988</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>CHAVES</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	--------------------------	----------------------	-------------------------

Well Status

☒ YES ☐ NO	TA'D WELL	☒ YES ☐ NO	SHUT-IN	☒ INJ ☐ SWD	INJECTOR	☐ OIL ☐ GAS	PRODUCER	DATE <i>12/10/15</i>
--	-----------	--	---------	---	----------	--	----------	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>N/A</i>	<i>N/A</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	<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 ☐
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>Aldo</i>	OIL CONSERVATION DIVISION
Printed name: <i>Aldo Porraz</i>	Entered into RBDMS <i>GB</i>
Title:	Re-test
E-mail Address:	
Date: <i>12/10/15</i>	Phone:
Witness: <i>James</i>	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 11 2015