



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

BRADENHEAD TEST REPORT

Operator Name <i>Kevin O. Butters & Assoc.</i>	*API Number <i>30025277890000</i>
Property Name <i>Aetna Eaves #2 SWD</i>	Well No. <i>#2</i>

7. Surface Location

U/L - Lot <i>A</i>	Section <i>26</i>	Township <i>T16S</i>	Range <i>R38E</i>	<i>300</i>	Feet from <i>17N</i>	N/S Line	Feet From <i>990</i>	E/W Line <i>FEL</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>2-9-16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure					
Flow Characteristics					
Puff	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	CO2 ☒ WTR <i>900</i> ☒ GAS ☒
Steady Flow	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	Type of Fluid
Surges	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	Injected for
Down to nothing	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	Waterflood if
Gas or Oil	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	☒ Y ☒ N	applies.
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.

Inject 400 BWPD

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jimmie Reynolds</i>	Entered into RBDMS <i>Bl</i>
Title: <i>Supt.</i>	Re-test
E-mail Address:	
Date: <i>2-9-16</i>	Phone: <i>432-741-9484</i>
Witness:	

FEB 11 2016