



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

BRADENHEAD TEST REPORT

Operator Name <u>hinn Operating</u>	API Number <u>30-025-11518</u>
Property Name <u>hangle Matrix Queen Unit</u>	Well No. <u>7</u>

7. Surface Location

UL - Lot <u>P</u>	Section <u>10</u>	Township <u>25 S</u>	Range <u>37 E</u>	Feet from <u>990</u>	N/S Line <u>S</u>	Feet From <u>990</u>	E/W Line <u>E</u>	County <u>lea</u>
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Well Status

TA'D WELL YES <u>NO</u>	SHUT-IN YES <u>NO</u>	INJECTOR <u>INJ</u>	SWD	OIL PRODUCER GAS	DATE <u>2/16/16</u>
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OBSERVED DATA

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

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

Signature: <u>[Signature]</u>	OIL CONSERVATION DIVISION
Printed name: <u>UNION CONTREKAS</u>	Entered into RBDMS <u>CF</u>
Title:	Re-test
E-mail Address:	
Date: <u>2/14/16</u>	Phone: <u>575/909-0031</u>
Witness: <u>Carl Hower</u>	

In
C.F.

FEB 25 2016