



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

BRADENHEAD TEST REPORT

Operator Name <i>chevron USA Inc</i>	API Number <i>30-025-33464</i>
Property Name <i>Vacuum Grayberg San Andres</i>	Well No. <i>159</i>

7. Surface Location

UL - Lot <i>A</i>	Section <i>1</i>	Township <i>18S</i>	Range <i>34E</i>	Feet from <i>907</i>	N/S Line <i>N</i>	Feet From <i>350</i>	E/W Line <i>E</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>2/23/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>			<i>130</i>	<i>300</i>
Flow Characteristics					
Puff	Y / ☒	Y / N	Y / N	Y / N	CO2 ☐
Steady Flow	Y / ☒	Y / N	Y / N	Y / N	WTR ☐
Surges	Y / ☒	Y / N	Y / N	Y / N	GAS ☐
Down to nothing	☒ / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / ☒	Y / N	Y / N	Y / N	Injected for
Water	Y / ☒	Y / N	Y / N	Y / N	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: <i>Mike Holdridge</i>	OIL CONSERVATION DIVISION
Printed name: <i>Mike Holdridge</i>	Entered into RBDMS <i>CF</i>
Title: <i>Field Specialist</i>	Re-test
E-mail Address: <i>MOKW</i>	
Date: <i>2-23-16</i>	Phone: <i>575-631-9124</i>
Witness: <i>Carol Flowers</i>	

FEB 25 2016

In
cf.