

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

HOBBS OCD
MAR 11 2016
RECEIVED

BRADENHEAD TEST REPORT

Operator Name Chevron <i>USA INC</i> ✓	API Number <i>30-025-25797</i> ✓
Property Name Central Vacuum Unit ✓	Well No. <i>108</i> ✓

2. Surface Location

UL - Lot <i>6</i>	Section <i>6</i>	Township <i>18N</i>	Range <i>35E</i>	Feet from <i>2630</i>	N/S Line <i>N</i>	Feet From <i>1480</i>	E/W Line <i>E</i>	County Lea ✓
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Well Status

TA'D WELL YES <i>(NO)</i>	SHUT-IN YES <i>(NO)</i>	INJECTOR <i>(INJ)</i>	SWD	PRODUCER OIL	GAS	DATE <i>2-26-16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>1776</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 <i>X</i>
Surges	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	GAS —
Down to nothing	<i>(N) / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>(N) / N</i>	Type of Fluid
Gas or Oil	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	Injected for
Water	<i>Y / (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / (N)</i>	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>Tanner DeHaan</i>	<i>BS 3/11/16</i> OIL CONSERVATION DIVISION
Printed name: Tanner DeHaan	Entered into RBDMS <i>BS</i>
Title: FSA	Re-test
E-mail Address: TZYR@Chevron.com	
Date: <i>2-26-16</i>	Phone: 575-390-4449
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 14 2016