

MAR 14 2016

**RECEIVED**

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

**BRADENHEAD TEST REPORT**

Operator Name CHEVRON USA INC ✓	API Number 30-025-02112 ✓
Property Name CENTRAL VACUUM UNIT ✓	Well No. 37 ✓

<sup>2</sup> Surface Location

UL - Lot 0	Section 25	Township 17S	Range 34E	Feet from 660	N/S Line S	Feet From 1980	E/W Line E	County LEA ✓
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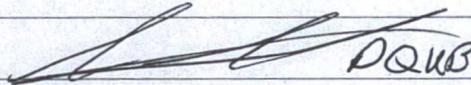
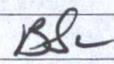
Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJ INJECTOR <input type="radio"/>	SWD <input checked="" type="radio"/>	PRODUCER GAS <input type="radio"/>	DATE 2-17 -2016
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0	N/A	130	430
<u>Flow Characteristics</u>					
Puff	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/N	Y/N	CO2 <u>X</u>
Steady Flow	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/N	Y/N	WTR <u>X</u>
Surges	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/N	Y/N	GAS <u>    </u>
Down to nothing	<input checked="" type="radio"/> /N	<input checked="" type="radio"/> /N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	Y/N	Y/N	Injected for
Water	Y/ <input checked="" type="radio"/>	Y/ <input checked="" type="radio"/>	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: 	3/23/16
Printed name: DANIEL PACE	OIL CONSERVATION DIVISION
Title: FIELD SPECIALIST A	Entered into RBDMS 
E-mail Address: DQKB@CHEVRON.COM	Re-test
Date: 2-17 -2016	Phone: 575-704-2365
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 23 2016