

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

BRADENHEAD TEST REPORT

HOBBS OCD

MAR 14 2016

RECEIVED

Operator Name Chevron	USA WC ✓	API Number 30-025-25719	✓
Property Name Central Vacuum Unit	✓	Well No. 44	✓

7. Surface Location

UL - Lot D	Section 31	Township 17S	Range 35E		Feet from 134	N/S Line N	Feet From 1219	E/W Line W	County Lea	✓
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
Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR IN	SWD	OIL PRODUCER OIL	GAS	DATE 3-3-16
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0	N/A	400	1620
Flow Characteristics					
Puff	Y / <del>NO</del>	Y / <del>NO</del>	Y / N	Y / <del>NO</del>	CO2 <input checked="" type="checkbox"/>
Steady Flow	Y / <del>NO</del>	Y / <del>NO</del>	Y / N	<del>Y</del> / N	WTR <input checked="" type="checkbox"/>
Surges	Y / <del>NO</del>	Y / <del>NO</del>	Y / N	Y / <del>NO</del>	GAS <input type="checkbox"/>
Down to nothing	<del>Y</del> / N	<del>Y</del> / N	Y / N	<del>Y</del> / N	Type of Fluid
Gas or Oil	Y / <del>NO</del>	Y / <del>NO</del>	Y / N	<del>Y</del> / <del>NO</del>	Injected for
Water	Y / <del>NO</del>	Y / <del>NO</del>	Y / N	Y / <del>NO</del>	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: 	OIL CONSERVATION DIVISION
Printed name: Tanner DeHaan	Entered into RBDMS 
Title: FSA	Re-test
E-mail Address: TZYR@Chevron.com	
Date: 3-3-16	Phone: 575-390-4449
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 23 2016