

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 30-025-02959 ✓
Property Name CENTRAL VACUUM UNIT ✓	Well No. 50 ✓

7. Surface Location

UL - Lot D	Section 31	Township 17s	Range 35E	Feet from 660	N/S Line N	Feet From 660	E/W Line W	County LEA ✓
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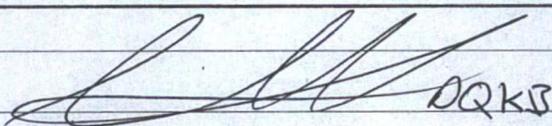
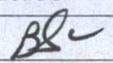
Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR INJ <input type="radio"/> SWD <input checked="" type="radio"/>	PRODUCER OIL <input checked="" type="radio"/> 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	125	450
Flow Characteristics					
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: 	DB 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