

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

HOBBS OCD

MAR 18 2016

RECEIVED

BRADENHEAD TEST REPORT

Operator Name CHEVRON <i>USA INC</i>	API Number 30-025-33587
Property Name WEST VACUUM UNIT	Well No. 56

7. Surface Location

UL - Lot O	Section 34	Township 17S	Range 34E	Feet from 100	N/S Line S	Feet From 2450	E/W Line E	County LEA
----------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR INJ	SWD	PRODUCER OIL	GAS	DATE 3-2-1 2016
-------------------------	-----------	-----------------------	-----------	------------------------	-----	------------------------	-----	---------------------------

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>150</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/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>Linda Robinson</i>	OIL CONSERVATION DIVISION
Printed name: LINDA ROBINSON	Entered into RBDMS <i>BS</i>
Title: FIELD SPECIALIST A	Re-test
E-mail Address: LRUW@CHEVRON.COM	
Date: 3-2-2016	Phone: 575-704-2225
Witness:	

MAR 30 2016