

State of New Mexico

Energy, Minerals and Natural Resources Department

MAR 24 2016 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Apache Corp.</i>	API Number <i>30-025-05784</i>
Property Name <i>Norm Monument Grayburg San Andres Unit</i>	Well No. <i>07</i>

Surface Location									
UL - Lot <i>G</i>	Section <i>32</i>	Township <i>19S</i>	Range <i>37E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>Lea</i>	

Well Status									
TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> INJ	SWD	PRODUCER OIL	GAS	DATE <i>3-23-16</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>Ø</i>		<i>Ø</i>	<i>1060</i>
Flow Characteristics					
Puff	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / N</i>	<i><input checked="" type="radio"/> Y / N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / N</i>	<i>Y / <input checked="" type="radio"/> N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / N</i>	<i>Y / <input checked="" type="radio"/> N</i>	GAS <input type="checkbox"/>
Down to nothing	<i><input checked="" type="radio"/> Y / N</i>	<i><input checked="" type="radio"/> Y / N</i>	<i>Y / N</i>	<i><input checked="" type="radio"/> Y / N</i>	Type of Fluid
Gas or Oil	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / N</i>	<i>Y / <input checked="" type="radio"/> N</i>	Injected for
Water	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / <input checked="" type="radio"/> N</i>	<i>Y / N</i>	<i>Y / <input checked="" type="radio"/> 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>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jim Ellison</i>	Entered into RBDMS <i>CF</i>
Title:	Re-test
E-mail Address:	
Date:	
Phone: <i>575-441-7734</i>	
Witness: <i>Carel Flowers</i>	

*In C.F.*

INSTRUCTIONS ON BACK OF THIS FORM

APR 04 2016