

HOBBS OCD

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

MAR 22 2016

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Conoco Phillips</i>	*API Number <i>30-025-27338</i>
Property Name <i>EAST Vacuum GSA 1910</i>	Well No. <i>4</i>

7. Surface Location

UL - Lot <i>P</i>	Section <i>19</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>1200</i>	N/S Line <i>S</i>	Feet From <i>1200</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJECTOR ☒	SWD	OIL PRODUCER GAS	DATE <i>2/11/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Φ</i>	<i>N/A</i>	<i>N/A</i>	<i>Φ</i>	<i>1225</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☐
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applies
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Malcolm Cox</i>	OIL CONSERVATION DIVISION
Printed name: <i>Malcolm Cox</i>	Entered into RBDMS <i>GP</i>
Title: <i>Production Specialist</i>	Re-test
E-mail Address:	
Date: <i>2/11/16</i>	Phone:
Witness: <i>James Brown</i>	

INSTRUCTIONS ON BACK OF THIS FORM

APR 05 2016