

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

BRADENHEAD TEST REPORT

Operator Name <i>Oxy</i>	API Number <i>30-025-07611</i>
Property Name <i>South Hobbs</i>	Well No. <i>55</i>

7. Surface Location

UL - Lot <i>0</i>	Section <i>4</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</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	INJ NO	SWD	OIL	PRODUCER GAS	DATE <i>4/5/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>n/a</i>	<i>n/a</i>	<i>n/a</i>	<i>0</i>	<i>2</i>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	<i>Y / N</i>	CO2 ___
Steady Flow	Y / N	Y / N	Y / N	<i>Y / N</i>	WTR ___
Surges	Y / N	Y / N	Y / N	<i>Y / N</i>	GAS ___
Down to nothing	Y / N	Y / N	Y / N	<i>Y / N</i>	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	<i>Y / N</i>	Injected for
Water	Y / N	Y / N	Y / N	<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>Mendy Johnson</i>	Date: <i>4/20/2016</i>	OIL CONSERVATION DIVISION
Printed name: <i>MENDY JOHNSON</i>		Entered into RBDMS <i>OB</i>
Title: <i>ADMIN ASSOCIATE</i>		Re-test
E-mail Address: <i>MENDY_JOHNSON@OXY.COM</i>		
Date: <i>4/5/16</i>	Phone:	
Witness: <i>Spencer</i>		

APR 29 2016