

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

MAY 27 2016

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <u>Jegany</u>	API Number <u>30 005 01107</u>
Property Name <u>West Cap Queen Sandcreek</u>	Well No. <u>16</u>

Surface Location

UT Lot <u>B</u>	Section <u>21</u>	Township <u>14</u>	Range <u>31</u>	Feet from <u>330</u>	N/S Line <u>N</u>	Feet From <u>2310</u>	E/W Line <u>E</u>	Count <u>chairs</u>
--------------------	----------------------	-----------------------	--------------------	-------------------------	----------------------	--------------------------	----------------------	------------------------

Well-Status

TA'D WELL <u>YES</u>	<u>NO</u>	YES	SHUT-IN <u>NO</u>	<u>INJ</u>	INJECTOR SWD	OIL	PRODUCER GAS	DATE <u>5-17-16</u>
-------------------------	-----------	-----	----------------------	------------	-----------------	-----	-----------------	------------------------

OBSERVED DATA

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

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

Signature: <u>[Signature]</u>	OIL CONSERVATION DIVISION
Printed name: <u>Aldo Penn</u>	Entered into RBDMS
Title: <u>Field Supervisor</u>	Re-test <u>[Signature]</u>
E-mail Address:	
Date: <u>5-17-16</u>	Phone:
Witness: <u>Kristen Hardy</u>	