

HOBBS OCD

MAY 27 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Seaney</i>	API Number <i>3000521153</i>
Property Name <i>Dreckley Queen Sand Unit</i>	Well No. <i>56</i>

Surface Location

UL - Lot <i>D</i>	Section <i>15</i>	Township <i>14</i>	Range <i>31</i>	Feet from <i>130</i>	N/S Line <i>N</i>	Feet From <i>370</i>	E/W Line <i>W</i>	County <i>Chaves</i>
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Well Status

TA'D WELL ☒ YES	☒ NO	SHUT-IN ☒ YES	☒ NO	INJECTOR ☒ YES	SWD ☒ NO	OIL ☒ YES	PRODUCER ☒ NO	GAS ☒ YES	DATE <i>5-17-16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod C'sng	(E)Tubing
Pressure	<i>Ø</i>			<i>Ø</i>	<i>1360</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>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>A. Ido Perra</i>	Entered into RBDMS
Title: <i>Field Supervisor</i>	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>5-17-16</i>	
Phone:	
Witness: <i>Arvid Heady</i>	