

JUL 25 2016

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

BRADENHEAD TEST REPORT

Operator Name <i>Seely</i>		API Number <i>30-025-0232</i>
Property Name <i>Central EK Dured Unit</i>		Well No. <i>1</i>

7. Surface Location								
UL - Lot <i>D</i>	Section <i>17</i>	Township <i>18S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>2</i>	Feet From <i>661</i>	E/W Line <i>W</i>	County <i>LCA</i>

Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJECTOR INJ ☒ SWD ☐	PRODUCER OIL ☐ GAS ☐	DATE <i>6-27/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>φ</i>	<i>21</i>	<i>2A</i>	<i>φ</i>	<i>1310</i>
Flow Characteristics					
Puff	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	CO2 ☐
Steady Flow	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	WTR ☒
Surges	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	GAS ☐
Down to nothing	<i>φ</i> / N	Y / N	Y / N	<i>φ</i> / N	Type of Fluid
Gas or Oil	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	Injected for
Water	Y / <i>N</i>	Y / N	Y / N	Y / <i>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>Steve Clingman</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Steve Clingman</i>		Entered into RBDMS	
Title: <i>Consultant</i>		Re-test <i>5/27</i>	
E-mail Address:			
Date: <i>6/27/16</i>	Phone:		
	Witness: <i>[Signature]</i>		