

HOBBS OCD

JUL 25 2016

RECEIVED

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>30-025-34880</i>
Property Name <i>EK Pearce SWD Unit</i>	Well No. <i>901</i>

7. Surface Location									
UL - Lot <i>L</i>	Section <i>20</i>	Township <i>18S</i>	Range <i>34E</i>		Feet from <i>1650</i>	N/S Line <i>S</i>	Feet From <i>330</i>	E/W Line <i>W</i>	County <i>Lea</i>

Well Status

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

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>NA</i>	<i>NA</i>	<i>0</i>	<i>900</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
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<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>Steve Clingman</i>	OIL CONSERVATION DIVISION
Printed name: Steve Clingman	Entered into RBDMS
Title: Consultant	Re-test <i>[Signature]</i>
E-mail Address:	
Date: <i>6/27/16</i>	Phone:
	Witness: <i>[Signature]</i>