

AUG 03 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>✓</i> <u>MCGOWAN WORKING PARTNERS INC.</u>		API Number <u>3002533418 0000</u>
Property Name <i>✓</i> <u>STATE 35 UNIT</u>		Well No. <u>015</u>

2. Surface Location

UL - Lot <i>✓</i> <u>12</u>	Section <u>35</u>	Township <u>17S</u>	Range <u>34E</u>	Feet from <u>2527</u>	N/S Line <u>S</u>	Feet From <u>1955</u>	E/W Line <u>W</u>	County <u>LeA</u>
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Well Status

TA'D WELL <i>✓</i> YES	SHUT-IN YES <u>(NO)</u>	INJECTOR INJ	SWD	PRODUCER <u>(OIL)</u> GAS	DATE <u>3/22/16</u>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>✓</i> <u>φ</u>	<u>φ</u>	<u>N/A</u>	<u>200 200</u>	<u>200</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
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	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: <u>Jack Stevenson</u>	OIL CONSERVATION DIVISION
Printed name: <u>JACK STEVENSON</u>	Entered into RBDMS <i>✓</i>
Title: <u>Pumper</u>	Re-test <i>✓</i>
E-mail Address:	
Date: <u>3/22/16</u>	Phone: <u>575-631-1083</u>
Witness: <u>JBow</u>	