

**HOBBS OCD**

**SEP 14 2016**

**RECEIVED**

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

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

**BRADENHEAD TEST REPORT**

Operator Name <i>Vanguard</i>	API Number <i>30-025-10324</i>
Property Name <i>Cole State</i>	Well No. <i>4</i>

**7. Surface Location**

UL - Lot <i>E</i>	Section <i>16</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>Lea</i>
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**Well Status**

TA'D WELL <input checked="" type="checkbox"/> YES	SHUT-IN <input checked="" type="checkbox"/> YES	INJ <input type="checkbox"/>	INJECTOR <input type="checkbox"/>	SWD <input type="checkbox"/>	PRODUCER <input checked="" type="checkbox"/> OIL	GAS <input type="checkbox"/>	DATE <i>9/13/14</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>15</i>	<i>30</i>
<b>Flow Characteristics</b>					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
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:		OIL CONSERVATION DIVISION
Printed name: <i>J. J.</i>		Entered into RBDMS
Title:		Re-test <i>[Signature]</i>
E-mail Address:		
Date:	Phone:	
Witness:		

INSTRUCTIONS ON BACK OF THIS FORM