

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

HOBBS OCD

NOV 30 2016

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>COG</i>	API Number <i>30-025-41525</i>
Property Name <i>North Lusk 32 St.</i>	Well No. <i>1</i>

Surface Location

UL - Lot <i>H</i>	Section <i>32</i>	Township <i>18S</i>	Range <i>32E</i>	Feet from <i>1550</i>	N/S Line <i>S</i>	Feet From <i>1800</i>	E/W Line <i>W</i>	County <i>2CA</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ NO	INJECTOR SWD	OIL PRODUCER GAS	DATE <i>11/29/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>Ø</i>	<i>-</i>	<i>Ø</i>	<i>-14</i>
Flow Characteristics					<i>VAC</i>
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
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>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>11/29/16</i>	
Phone:	
Witness: <i>[Signature]</i>	