

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office DEC 5 2013

HOBBS OCD

BRADENHEAD TEST REPORT

Operator Name <i>S & D Operating</i>	API Number <i>30-025-25653</i>
Property Name <i>DRINKARD Homestead #1</i>	Well No. <i>1</i>

Surface Location

UL - Lot <i>C</i>	Section <i>25</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>2310'</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJECTOR INJ ☒ SWD ☐	PRODUCER <i>OIL</i> ☒ <i>GAS</i> ☐	DATE <i>12/10/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>TSTM</i>	<i>TSTM</i>		<i>20 Psi</i>	<i>20 Psi</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>		<i>Y/N</i>	<i>CO2</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>		<i>Y/N</i>	<i>WTR</i>
Surges	<i>Y/N</i>	<i>Y/N</i>		<i>Y/N</i>	<i>GAS</i>
Down to nothing	<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>	Injected for
Water	<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.

Recently filed C-103 and performed workover (Acid). Well is in good shape w/ no unusual flows or pressures.

Signature: <i>Marvin Burrows</i>	OIL CONSERVATION DIVISION
Printed name: <i>MARVIN BURROWS</i>	Entered into RBDMS
Title: <i>AGENT FOR</i>	Re-test
E-mail Address: <i>BURROWSMARVIN@GMAIL.COM</i>	<i>gm</i>
Date: <i>12/10/16</i>	
Phone: <i>575-631-8067</i>	
Witness: <i>Marvin Burrows</i>	