## **State of New Mexico**

JAN 1 8 2017

## **Energy, Minerals and Natural Resources Department** Oil Conservation Division Hobbs District Office

HOBBS OCD

| BRADENHEAD TEST REPORT  |   |                  |               |              |                           | The state of the s |        |                    |  |
|---|---|------------------|---------------|--------------|---------------------------|--|--------|--------------------|--|
| Operator Name TORA OIL AND GAS  |   |                  |               |              | 30-025-24334-0000         |  |        |                    |  |
| Property Name   |   |                  |               |              |                           | Well No.   |        |                    |  |
| ARCO CRUMP  |   |                  |               |              |                           |  | 002    |                    |  |
| 7. Surface Location   |   |                  |               |              |                           |  |        |                    |  |
| UL - Lot Section To   | Feet from                               |                  | N/S Line Feet |              |                           | E/W Line   | County |                    |  |
| J 1 24-S 36-E 1650 S  |   |                  |               |              |                           | 50   | E –    | LEA                |  |
| Well Status  TA'D Well SHUT-IN INJECTOR PRODUCER DATE   |   |                  |               |              |                           |  |        |                    |  |
| TA'D Well SHUT-IN   |   |                  |               |              |                           | PRODUCER DATE  J - 18 - 17 - 1   |        |                    |  |
| YES NO  | YES                                     | YES (NO OX) SWID |               |              | L                         | GAS  | 1-     | 18-11              |  |
| OBSERVED DATA   |   |                  |               |              |                           |  |        |                    |  |
|   | (A)Surf-Interm                          | (B)Interm(1)     |               | (C)Interm(2) |                           | (D)Prod Csng   |        | (E)Tubing          |  |
| Pressure  | 0 _                                     |                  |               |              |                           | 0 -  |        | 300 -              |  |
| Flow Characteristics  | -                                       |                  |               |              |                           |  |        | -                  |  |
| Puff  | Y/O                                     | Y / N            |               | Y / N        |                           | OY / N   |        | CO2                |  |
| Steady Flow   | Y / 🚱                                   | Y / N            |               | Y / N        |                           | Y / 🔗  |        | WTR                |  |
| Surges  | Y / 🔊                                   | Y/N              |               | Y / N        |                           | Y/0  |        | GAS                |  |
| Down to nothing   | OY / N                                  | Y/N              |               | Y / N        |                           | O / N  |        | If applicable type |  |
| Gas or Oil  | Y / 🐯                                   | Y/N              |               | Y / N        |                           | Y / 🔗  |        | fluid injected for |  |
| Water   | Y / 🛇                                   | Y / N            |               | Y / N        |                           | Y / 🐼  |        | Waterflood         |  |
| Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies. |   |                  |               |              |                           |  |        |                    |  |
| Signature: 6) E. Araba  |   |                  |               |              | OIL CONSERVATION DIVISION |  |        |                    |  |
| Printed name:   |   |                  |               |              | Entered into RBDMS        |  |        |                    |  |
| Title:  |   |                  |               |              | Re-test                   |  |        |                    |  |
| E-mail Address:   |   |                  |               |              | KMO                       |  |        |                    |  |
| Date: 1 = 18 - 1  | 8 - 17 Phone:                           |                  |               |              |                           |  |        |                    |  |
|   | Witness: KERRY FORTNER-OCD 575-399-3221 |                  |               |              |                           |  |        |                    |  |