

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

HOBBS

JAN 26 17

RECEIVED

BRADENHEAD TEST REPORT

Operator Name DUGAN PRODUCTION COMPANY		API Number 30-005-10524-0000
Property Name KM CHAVEROO SA UNIT		Well No. 110

7. Surface Location

UL - Lot N	Section 2	Township 8-S	Range 33-E	Feet from 990	N/S Line S	Feet From 1980	E/W Line W	County CHAVES
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Well Status

TA'D Well YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE 1-25-17
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OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	0			0	30
Flow Characteristics					
Puff	Y / <input checked="" type="radio"/> N	Y / N	Y / N	<input checked="" type="radio"/> / N	CO2 _____
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	WTR _____
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	GAS _____
Down to nothing	<input checked="" type="radio"/> / N	Y / N	Y / N	<input checked="" type="radio"/> / N	If applicable type
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	fluid injected for
Water	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / <input checked="" type="radio"/> N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Kerry Fortner</i>		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test <i>[Signature]</i>
E-mail Address:		
Date: 1-25-17	Phone:	
Witness: KERRY FORTNER-OCD 575-399-3221		

*Kerry Fortner*