

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

HOBBS OCD

JAN 26 2017

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Oxy USA</i>	API Number <i>30-025-31650</i>
Property Name <i>ARACANGA Fed</i>	Well No. <i>1</i>

7. Surface Location								
UL - Lot <i>0</i>	Section <i>4</i>	Township <i>23S</i>	Range <i>32E</i>	Feet from <i>330</i>	N/S Line <i>5</i>	Feet From <i>2310</i>	E/W Line <i>E</i>	County <i>Lea</i>

Well Status						DATE
TA'D Well YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJECTOR INJ ☐ SWD ☒	PRODUCER OIL ☐ GAS ☐	<i>1/24/17</i>		

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>920</i>
Flow Characteristics					
Puff	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	CO2 ☐
Steady Flow	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	WTR ☒
Surges	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	GAS ☐
Down to nothing	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	If applicable type
Gas or Oil	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	fluid injected for
Water	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	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>Leo Lopez</i>	OIL CONSERVATION DIVISION
Printed name: <i>Leo Lopez</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>1/24/17</i>	Phone:
Witness: <i>J. Dow</i>	