

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

APR 19 2017

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>JR Dil</i>	API Number <i>30-025-04189</i>
Property Name <i>Reed Sanderson</i>	Well No. <i>8</i>

7. Surface Location

UL - Lot <i>I</i>	Section <i>4</i>	Township <i>20S</i>	Range <i>36E</i>	Feet from <i>1980</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☐ YES ☒ NO	INJECTOR ☒ INJ ☐ SWD	OIL PRODUCER ☐ OIL ☐ GAS	DATE <i>4/17/17</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>500</i>
Flow Characteristics					
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: <i>Joe N. Tippy</i>	Entered into RBDMS
Title: <i>MANAGER</i>	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>4/17/17</i>	
Phone:	
Witness: <i>[Signature]</i>	