| District I 1625 N. French Dr., | Hobbs, NM 88240 | CO | | | | | | | | (, , , | |
|---|-----------------|----------------|--|---------------------------|-----|----------------|---------------------------|--------------|-----|--|--|
| State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office BRADENHEAD TEST REPORT | | | | | | | | | | | |
| BRADENHEAD TEST REPORT Operator Name 3. API Number | | | | | | | | | | | |
| Operator Name CHEVRON USA | | | | | | | | 30-025-03531 | | | |
| | | CENTE | CENTRAL VACUUM UNIT | | | | | Well No. | | | |
| 7. Surface Location | | | | | | | | | | | |
| UL - Lot | | | 4. - | | | | Feet Fi | | | County LEA | |
| | 31 1 | 15 35E | | 1980 N Well Status | | | 1060 | | E | LEA | |
| | | | | | | | | | | | |
| Well Status | | SHUT | -IN | PRODUCING | | 3-22 | | -17 | | | |
| OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH | | | | | | | | | | | |
| OBSERVED DATA | | | | | | | | | | | |
| If bradenhead flowed water, check all of the descriptions that apply: | | | | | | | | | | | |
| Pressure | | (A)Surf-Interm | (B)II | (B)Interm(1)-Interm(2) | | (C)Interm-Prod | | (D)Prod Csng | | (E)Tubing | |
| Flow Characteristics | | 0 | | | | | | 140 | | 450 | |
| Puff | | Y/N | | Y/N | | Y/N | | Y/N | | - | |
| Steady Flow | | Y / (N) | | Y / N | Y/N | | | Y/N | | - | |
| Surges | | Y/6 | | Y/N | | Y / N | | Y / N | | - | |
| Down to nothing | | O N | | Y / N | | Y/N | | Y / N | | 1 | |
| Gas or Oil | | Y / (N) | | Y / N | Y/N | | | Y / N | | 1 | |
| Water | | Y / (N) | | Y / N Y / | | Y / N | Y/N | | Y/N | 1 | |
| If bradenhead flowed water, check all of the descriptions that apply: | | | | | | | | | | | |
| CLEAR | | FRESH | ACCOUNT OF THE PARTY OF THE PAR | SALTY | | SULFUR | | BLACK | | | |
| | | | | | | | | | | | |
| Remarks: INJECTING AT THIS TIMEWTR,GAS,CO2 | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | 1 | | | ٨ | | | | |
| Signature: | | | | | | | OIL CONSERVATION DIVISION | | | | |
| Printed name: RUBEN RODRIGUEZ | | | | | | | Entered into RBDMS | | | | |
| Title: FSA | | | | | | | Re-test | | | | |
| E-mail Address: TZCL@CHEVRON.COM | | | | | | | | | | | |
| Date: 3-22-17 Phone: 575-513-5526 | | | | | | | | | TV. | | |
| Mailed 4.13.17 Witness: | | | | | | | | | | | |
| | | - | | | | - | | | | The second secon | |