

HOBBS OCD

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

APR 03 2017

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Fasken Oil</i>		API Number <i>30-025-05270</i>
Property Name <i>Denton SWD</i>		Well No. <i>#2</i>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>F</i>	<i>10</i>	<i>15S</i>	<i>37E</i>	<i>2310</i>	<i>S</i>	<i>330</i>	<i>E</i>	<i>LEA</i>

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR <i>SWD</i>	PRODUCER OIL	GAS	DATE <i>3-30-17</i>
------------------	----	----------------	----	-----	------------------------	-----------------	-----	------------------------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>680</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>Neil Weeks</i>	OIL CONSERVATION DIVISION
Printed name: <i>Neil Weeks</i>	Entered into RBDMS
Title: <i>Production Foreman</i>	Re-test <i>AK</i>
E-mail Address: <i>neilwe@forl.com</i>	
Date: <i>3/30/17</i>	
Phone: <i>432-661-3136</i>	
Witness: <i>Greg Robinson</i>	