

JUN 14 2017

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

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corp.</i>	API Number <i>30-025-04158</i>
Property Name <i>NMGSAU</i>	Well No. <i>1811</i>

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>K</i>	<i>2</i>	<i>20S</i>	<i>36E</i>	<i>1980</i>	<i>S</i>	<i>1980</i>	<i>W</i>	<i>Lea</i>

Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR <input checked="" type="radio"/> INJ	SWD	OIL PRODUCER GAS	DATE <i>6-7-17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>NA</i>	<i>20</i>	<i>720</i>
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	
Water	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input checked="" type="radio"/> N	

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

Signature: <i>JD Ellison</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jim Ellison</i>	Entered into RBDMS
Title: <i>Instrument Tech</i>	Re-test <i>X X</i>
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Date:	
Phone: <i>575-441-7734</i>	
Witness:	