

HOBBS OCD  
JUL 10 2017  
RECEIVED

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

**BRADENHEAD TEST REPORT**

Operator Name <div style="font-size: 1.5em; font-family: cursive;">APACHE Corp</div>	API Number <div style="font-size: 1.5em; font-family: cursive;">30-025-10420</div>
Property Name <div style="font-size: 1.5em; font-family: cursive;">Eugene Wood</div>	Well No. <div style="font-size: 1.5em; font-family: cursive;">005</div>

<sup>2</sup> Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<div style="font-size: 1.5em; font-family: cursive;">B</div>	<div style="font-size: 1.5em; font-family: cursive;">22</div>	<div style="font-size: 1.5em; font-family: cursive;">22S</div>	<div style="font-size: 1.5em; font-family: cursive;">37E</div>	<div style="font-size: 1.5em; font-family: cursive;">589</div>	<div style="font-size: 1.5em; font-family: cursive;">N</div>	<div style="font-size: 1.5em; font-family: cursive;">2051</div>	<div style="font-size: 1.5em; font-family: cursive;">E</div>	<div style="font-size: 1.5em; font-family: cursive;">Lea</div>

Well Status

TA'D WELL	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input type="checkbox"/> SWD <input type="checkbox"/>	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>	<div style="font-size: 1.5em; font-family: cursive;">6-29-17</div>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<div style="font-size: 1.5em; font-family: cursive;">0</div>	<div style="font-size: 1.5em; font-family: cursive;">0</div>	<div style="font-size: 1.5em; font-family: cursive;">-</div>	<div style="font-size: 1.5em; font-family: cursive;">40</div>	<div style="font-size: 1.5em; font-family: cursive;">100</div>
Flow Characteristics					
Puff	Y / <input checked="" type="checkbox"/> N	Y / <input checked="" type="checkbox"/>	Y / N	Y / N	CO2 <input type="checkbox"/>
Steady Flow	Y / <input checked="" type="checkbox"/>	Y / <input checked="" type="checkbox"/>	Y / N	Y / N	WTR <input type="checkbox"/>
Surges	Y / <input checked="" type="checkbox"/>	Y / <input checked="" type="checkbox"/>	Y / N	Y / N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="checkbox"/> / N	<input checked="" type="checkbox"/> / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / <input checked="" type="checkbox"/>	Y / <input checked="" type="checkbox"/>	Y / N	Y / N	Injected for
Water	Y / <input checked="" type="checkbox"/>	Y / <input checked="" type="checkbox"/>	Y / N	Y / N	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: <div style="font-size: 1.5em; font-family: cursive;">Kyle Messimer</div>	OIL CONSERVATION DIVISION
Printed name: <div style="font-size: 1.5em; font-family: cursive;">Kyle Messimer</div>	Entered into RBDMS
Title: <div style="font-size: 1.5em; font-family: cursive;">Pumper 2</div>	Re-test
E-mail Address: <div style="font-size: 1.5em; font-family: cursive;">kyle.messimer@apachecorp.com</div>	<div style="font-size: 4em; font-family: cursive; color: red;">JMR</div>
Date: <div style="font-size: 1.5em; font-family: cursive;">6-29-17</div>	
Phone: <div style="font-size: 1.5em; font-family: cursive;">575-441-1022</div>	
Witness: <div style="font-size: 1.5em; font-family: cursive;">Kerry Fortner-OCD</div>	

575-399-3221

INSTRUCTIONS ON BACK OF THIS FORM