

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

HOBBS OCD

JUL 20 2017

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Remnant</i>	API Number <i>30-005-00929</i>
Property Name <i>Rock Queen</i>	Well No. <i>97</i>

7. Surface Location

UL - Lot <i>D</i>	Section <i>35</i>	Township <i>13S</i>	Range <i>31E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>Chaves</i>
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Well Status

TA'D WELL <i>YES</i>	SHUT-IN <i>NO</i>	INJECTOR <i>NO</i>	SWD <i>NO</i>	OIL <i>NO</i>	PRODUCER <i>NO</i>	GAS <i>NO</i>	DATE <i>7/12/17</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>✓</i>	<i>✓</i>	<i>0</i>	<i>500</i>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 <i>✓</i>
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR <i>✓</i>
Surges	Y / N	Y / N	Y / N	Y / N	GAS <i>✓</i>
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	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: <i>Arnie Baeza</i>	OIL CONSERVATION DIVISION
Printed name: <i>ARNIE BAEZA</i>	Entered into RBDMS
Title: <i>Senior Operator</i>	Re-test
E-mail Address:	
Date: <i>7-12-17</i>	
Phone:	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM