

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>30-005-21092</i>	
Property Name <i>WAKAN TANKA</i>		Well No. <i>4</i>	

7. Surface Location

UL Lot <i>L</i>	Section <i>27</i>	Township <i>13S</i>	Range <i>31E</i>	Feet from <i>2080</i>	N/S Line <i>S</i>	Feet From <i>990</i>	E/W Line <i>W</i>	County <i>Chaves</i>
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Well Status

TA'D WELL YES	NO <input checked="" type="radio"/>	SHUT-IN YES	NO <input checked="" type="radio"/>	INJ	INJECTOR SWD <input checked="" type="radio"/>	PRODUCER OIL	GAS	DATE <i>7/13/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	ϕ	—	—	ϕ	ϕ
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 ___
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR ___
Surges	Y/N	Y/N	Y/N	Y/N	GAS ___
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.

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Signature: <i>Arnie Barent</i>	OIL CONSERVATION DIVISION
Printed name: <i>Arnie Barent</i>	Entered into RBDMS
Title: <i>Lease Operator</i>	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>7/13/17</i>	
Phone:	
Witness: <i>[Signature]</i>	