

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

BRADENHEAD TEST REPORT

Operator Name <i>Oxy</i>		API Number <i>30-025-28343</i>
Property Name <i>South Hobbs</i>		Well No. <i>140</i>

7. Surface Location

UL - Lot <i>2</i>	Section <i>4</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>1485</i>	N/S Line <i>S</i>	Feet From <i>1245</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJECTOR <i>NO</i>	SWD	OIL	PRODUCER	GAS	DATE <i>8/9/17</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>no gauge</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.

no oxy witness for tests ✓

Signature: <i>Mendy Johnson</i> AUG 24 2017		OIL CONSERVATION DIVISION
Printed name: <i>MENDY JOHNSON - OXY</i>		Entered into RBDMS
Title: <i>PAT - Trucking</i>		Re-test
E-mail Address:		<i>MR</i>
Date: <i>8/9/17</i>	Phone:	
Witness: <i>J. Lowe</i>		

INSTRUCTIONS ON BACK OF THIS FORM