

HOBBS OCD

AUG 28 2017

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Saber Oil</i>	API Number <i>30-025-11099</i>
Property Name <i>Langlie Mattix</i>	Well No. <i>#3</i>

7. Surface Location									
UL - Lot <i>m</i>	Section <i>14</i>	Township <i>24s</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>LEA</i>	

Well Status									
YES	TA'D WELL <i>(NO)</i>	YES	SHUT-IN <i>(NO)</i>	INJ <i>(NO)</i>	INJECTOR <i>(SWD)</i>	OIL	PRODUCER GAS	DATE <i>8-21-17</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>10</i>
Flow Characteristics					
Pull	<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 Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	
Phone:	
Witness: <i>Darryl Kalsen</i>	

388-3220

INSTRUCTIONS ON BACK OF THIS FORM