

HOBBS OCD

SEP 11 2017

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Pozo</i>	API Number <i>30-025-11501</i>
Property Name <i>Langle JA</i>	Well No. <i>81</i>

7. Surface Location

UL - Lot <i>15</i>	Section <i>8</i>	Township <i>253</i>	Range <i>37E</i>	Feet from <i>1980</i>	N/S Line <i>S</i>	Feet From <i>2310</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☐ YES ☒ NO	INJECTOR ☒ INJ ☐ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <i>8/14/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>200</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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.

Signature: <i>K. Townsend</i>	OIL CONSERVATION DIVISION
Printed name: <i>Kyle Townsend</i>	Entered into RBDMS
Title: <i>Manager</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>Kyle@PozoResources.com</i>	
Date: <i>8/14/17</i>	Phone: <i>713-305-9886</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM