

HOBBS OCD

OCT 16 2017

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State of New Mexico

Energy, Minerals and Natural Resources Department

Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>CML</i>		API Number <i>30-025-37567</i>
Property Name <i>Bougainvillea 33 ST</i>		Well No. <i>1</i>

1. Surface Location

UL - Lot <i>I</i>	Section <i>33</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>2010</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES	☒ NO	YES	SHUT-IN ☒ NO	INJ	INJECTOR	SWD	OIL	PRODUCER ☒ GAS	DATE <i>10/11/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod C'sng	(E)Tubing
Pressure	<i>Ø</i>	<i>Ø</i>	<i>—</i>	<i>250</i>	<i>70</i> ✓
Flow Characteristics					
Pull	<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>Jordan Owens</i>	OIL CONSERVATION DIVISION
Printed Name: <i>Jordan Owens</i>	Entered into RBDMS
Title: <i>Engineer</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>owensj@cmlexp.com</i>	
Date: <i>10/11/17</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM