

HOBBS OCD

NOV 30 2017

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Conoco Phillips</i>	API Number <i>30-025-42713</i>
Property Name <i>EVISA unit 3202</i>	Well No. <i>W 513</i>

2. Surface Location

UL - Lot <i>H</i>	Section <i>32</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>2455</i>	N/S Line <i>N</i>	Feet From <i>442</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

YES ☒ TA'D WELL	NO ☒	YES ☒ SHUT-IN	NO ☐	INJ ☒ INJECTOR	SWD ☐	OIL ☐ PRODUCER	GAS ☐	DATE <i>10/20/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>—</i>	<i>—</i>	<i>Ø</i>	<i>Ø</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:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>10/20/17</i>	Phone: <i>[Signature]</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM