

3-19-18

HOBBS OCD
MAR 26 2018
RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name CHEVRON <i>USA INC</i>		API Number 30-025- <i>02956</i>
Property Name CENTRAL VACUUM UNIT		Well No. <i>86</i>

7. Surface Location

UL - Lot <i>0</i>	Section <i>31</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</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	INJ	INJECTOR SWD	☒ OIL	PRODUCER GAS	DATE <i>3-6-</i> - 2018
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>260</i>	<i>480</i>
Flow Characteristics					
Puff	Y / ☒ N	Y / N	Y / N	Y / N	CO2 ☒ X
Steady Flow	Y / ☒ N	Y / N	Y / N	Y / N	WTR ☒ X
Surges	Y / ☒ N	Y / N	Y / N	Y / N	GAS ☒ X
Down to nothing	☒ Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / ☒ N	Y / N	Y / N	Y / N	Injected for
Water	Y / ☒ N	Y / N	Y / N	Y / N	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>Jameson Evans</i>		OIL CONSERVATION DIVISION	
Printed name: JAMESON EVANS		Entered into RBDMS	
Title: FIELD SPECIALIST A		Re-test <i>XX</i>	
E-mail Address: LKKM@CHEVRON.COM			
Date: <i>3-6</i> - 2018	Phone: 575-704-2467		
Witness: <i>Kerry Futer - OCD</i>			

399-3221

INSTRUCTIONS ON BACK OF THIS FORM