

HOBBS OCD

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

APR 13 2013

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Pogo 0.1 + GAS</i>		API Number <i>30-025-11320</i> ✓	
Property Name <i>Langlie JAL Unit</i>		Well No. <i>#5</i> ✓	

7. Surface Location

UL - Lot <i>B</i>	Section <i>32</i>	Township <i>24S</i>	Range <i>37E</i>	Feet from <i>990</i>	N/S Line <i>N</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>4-9-18</i> ✓
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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>0</i>
Flow Characteristics					
Puff	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	CO2 —
Steady Flow	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	WTR ✓
Surges	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	GAS ✓
Down to nothing	<i>Y</i> / N	Y / N	Y / N	<i>Y</i> / N	Type of Fluid
Gas or Oil	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	Injected for
Water	Y / <i>N</i>	Y / N	Y / N	Y / <i>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>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Stewart Reynolds</i>		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date:	Phone:		
Witness: <i>Harry Robinson</i>			

INSTRUCTIONS ON BACK OF THIS FORM