

HOBBS OCD

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

BRADENHEAD TEST REPORT

Operator Name <i>Stephens + Johnson</i>	API Number <i>30-025-05151</i>
Property Name <i>Denton North Wolfcamp</i>	Well No. <i>18</i>

Surface Location

UL - Lot <i>N</i>	Section <i>26</i>	Township <i>14S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>2180</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES	SHUT-IN ☒ YES	INJECTOR ☒ INJ	PRODUCER ☒ OIL	DATE <i>4/27/18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>✓</i>	<i>—</i>	<i>—</i>	<i>✓</i>	<i>✓</i>
Flow Characteristics					
Pull	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <i>—</i>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <i>—</i>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <i>—</i>
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 <i>mp</i>
E-mail Address:	
Date: <i>4/27/18</i>	Phone:
Witness: <i>ODover</i>	

INSTRUCTIONS ON BACK OF THIS FORM

(18)