

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

HOBBS OCD

APR 27 2018

BRADENHEAD TEST REPORT

REC-1

Operator Name <u>Stephens + Johnson</u>		API Number <u>30-025-05184</u>
Property Name <u>Denton North Wolfcamp</u>		Well No. <u>10</u>

Surface Location

UL - Lot <u>R</u>	Section <u>35</u>	Township <u>14S</u>	Range <u>37E</u>	Feet from <u>1980</u>	N/S Line <u>S</u>	Feet From <u>2130</u>	E/W Line <u>W</u>	County <u>Lea</u>
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Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☐ NO ☒	INJECTOR <u>INI</u>	SWD ☐	PRODUCER ☐	GAS ☐	DATE <u>4/27/18</u>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<u>6</u>			<u>6</u>	<u>2560</u>
Flow Characteristics					
Pull	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 ☐
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR ☐
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS ☐
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected fire
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	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: <u>4/27/18</u>	Phone:	
Witness: <u>[Signature]</u>		

INSTRUCTIONS ON BACK OF THIS FORM