

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

BRADENHEAD TEST REPORT

Operator Name <i>Chesson</i>	API Number <i>30-025-05377</i>
Property Name <i>Louington Taddock</i>	Well No. <i>10</i>

Surface Location

UL - Lot <i>B</i>	Section <i>31</i>	Township <i>16S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>2240</i>	E/W Line <i>E</i>	County <i>LCA</i>
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Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJECTOR ☒	SWD ☐	OIL ☐	PRODUCER GAS ☐	DATE <i>5/1/18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>1400</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 Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

HOBBS OOD
MAY 14 2018
RECEIVED

Signature: <i>Edgar Galt</i>	OIL CONSERVATION DIVISION
Printed name: <i>EDGAR GALT</i>	Entered into RBDMS
Title: <i>SSPS</i>	Re-test <i>MS</i>
E-mail Address: <i>BIVA@Chesson.com</i>	
Date: <i>5/1/18</i>	Phone: <i>575-441-4478</i>
Witness: <i>Boone</i>	

INSTRUCTIONS ON BACK OF THIS FORM