

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

BRADENHEAD TEST REPORT

Operator Name <i>Chevron</i>	*API Number <i>30-025-31700</i>
Property Name <i>VACUUM GIACIETA West</i>	Well No. <i>39</i>

7. Surface Location

UL - Lot <i>m</i>	Section <i>25</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>1194</i>	N/S Line <i>5</i>	Feet From <i>1055</i>	E/W Line <i>W</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>4/18/18</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>1200</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
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: <i>Eddie Gamble</i>	OIL CONSERVATION DIVISION
Printed name: <i>EDDIE GAMBLE</i>	Entered into RBDMS
Title: <i>SSPS</i>	Re-test
E-mail Address: <i>EDDIE@chevron.com</i>	
Date: <i>4/18/18</i>	
Phone: <i>575-441-4478</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM