

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

HOBBS OCD
MAY 14 2018
RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Churon</i>					API Number <i>30-025-25820</i>				
Property Name <i>C/VU Central Vacuum Unit</i>					Well No. <i>101</i>				
Surface Location									
UL - Lot <i>16</i>	Section <i>6</i>	Township <i>18S</i>	Range <i>35E</i>		Feet From <i>2450</i>	N/S Line <i>N</i>	Feet From <i>2632</i>	E/W Line <i>15</i>	County <i>Lea</i>
Well Status									
YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJ <i>NO</i>	SWD	OIL	PRODUCER	GAS	DATE <i>4/12/18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod C'sng	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>—</i>	<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	<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>	Waterlood 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>Edme Gallenas</i>	OIL CONSERVATION DIVISION
Printed name: <i>EDME GALLENAS</i>	Entered into RBDMS
Title: <i>SSPS</i>	Re-test
E-mail Address: <i>EDME@CHURON.COM</i>	
Date: <i>4/12/18</i>	
Phone: <i>575-441-4478</i>	
Witness: <i>J Bone</i>	

INSTRUCTIONS ON BACK OF THIS FORM