

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

HOBBS OCD

JUN 05 2018

BRADENHEAD TEST REPORT

Operator Name <i>C & J Well Services</i>	API Number <i>30-025-23786</i>
Property Name <i>State AB SWD</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>C</i>	Section <i>3</i>	Township <i>19S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet from <i>1980</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	INJ ☒	INJECTOR ☒	OIL ☒	PRODUCER GAS ☒	DATE <i>6/5/18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>0</i>
Flow Characteristics					<i>JAC</i>
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>Franklin Young</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	
Phone:	
Witness: <i>Joe</i>	

INSTRUCTIONS ON BACK OF THIS FORM