

District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS

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

JUL 12 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Ch. OPERATIONS</i>		API Number <i>30-025-05501</i>	
Property Name <i>Sun Rise 25 31</i>		Well No. <i>Q</i>	

Surface Location									
BL - Lot <i>B</i>	Section <i>25</i>	Township <i>18S</i>	Range <i>37E</i>		Feet from <i>330</i>	N/S Line <i>N</i>	Feet from <i>1980</i>	E/W Line <i>E</i>	County <i>Lea</i>

Well Status									
TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☐	INJ ☐	SWD ☐	PRODUCER OIL ☒ GAS ☐	DATE <i>7/12/18</i>				

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>Ø</i>	<i>Ø</i>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	Y / N	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ☐
Surges	Y / N	Y / N	Y / N	Y / N	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	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.

Well is Shut In - gmb

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <i>7/12/18</i>	Phone:		
Witness: <i>Bona</i>			

INSTRUCTIONS ON BACK OF THIS FORM