

District I
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Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

JUL 13 2018

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <u>momomum</u>		API Number <u>30-025-01720-</u>
Property Name <u>TEAS YATES</u>		Well No. <u>21</u>

Surface Location									
UL - Lot <u>F</u>	Section <u>13</u>	Township <u>20S</u>	Range <u>33E</u>		Feet from <u>1980</u>	N/S Line <u>N</u>	Feet From <u>1980</u>	E/W Line <u>W</u>	County <u>LRA</u>

Well Status									
TA'D WELL YES ☒	NO ☒	YES ☐	SHUT-IN NO ☒	INJ ☒	INJECTOR SWD ☐	OIL ☐	PRODUCER GAS ☐	DATE <u>6/28/18</u>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>0</u>	<u>—</u>	<u>—</u>	<u>0</u>	<u>475</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>—</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>—</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>—</u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected fire
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	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: <u>John Smith</u>		OIL CONSERVATION DIVISION
Printed name: <u>John Smith</u>		Entered into RBDMS
Title: <u>Pumper</u>		Re-test <u>[Signature]</u>
E-mail Address:		
Date: <u>6-28-18</u>	Phone:	
Witness: <u>[Signature]</u>		

INSTRUCTIONS ON BACK OF THIS FORM