

HOBBS OCD

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

JUL 24 2018

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Fulfor Oil + Gas</i>		API Number <i>30-025-28210</i>	
Property Name <i>Double SS</i>		Well No. <i>#1</i>	

Surface Location									
UL - Lot <i>N</i>	Section <i>26</i>	Township <i>24S</i>	Range <i>36E</i>		Feet from <i>990</i>	N/S Line <i>S</i>	Feet from <i>2310</i>	E/W Line <i>W</i>	County <i>LEA</i>

Well Status						DATE	
TA'D WELL YES	<i>NO</i>	YES	SHUT-IN <i>NO</i>	INJ	INJECTOR <i>SWD</i>	PRODUCER OIL GAS	<i>7-24-18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>VAC</i>
Flow Characteristics					
Pull	<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>	Waterflow 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>D. J. Pearce</i>		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test <i>[Signature]</i>	
E-mail Address:			
Date:	Phone:		
Witness: <i>Henry Romero</i>			

INSTRUCTIONS ON BACK OF THIS FORM