

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

HOBBS OCD

JUL 31 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>CANO Pedro O P N. Mex.</i>	API Number <i>30-005-20013</i>
Property Name <i>CATO San Andres</i>	Well No. <i>#19</i>

Surface Location

UL - Lot <i>A</i>	Section <i>10</i>	Township <i>8S</i>	Range <i>30E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet from <i>660</i>	E/W Line <i>E</i>	County <i>Chaves</i>
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Well Status

TA'D WELL YES ☒ NO ☐	SHUT-IN YES ☒ NO ☐	INJECTOR NO ☐ INJ ☒	SWD	OIL	PRODUCER	GAS	DATE <i>7-17-18</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>0</i>	<i>N/A</i>	<i>0</i>	<i>0</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 Injected for Waterflood if applies
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

OK

Signature: <i>Robert Major</i>	OIL CONSERVATION DIVISION
Printed name: Robert Major	Entered into RBDMS
Title: Regulatory Compliance Specialist	Re-test
E-mail Address: bob.major@nbiservices.com	
Date: 7/26/18	
Phone: 918 398 2736	
Witness: <i>Grey Robinson</i>	

INSTRUCTIONS ON BACK OF THIS FORM