

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

AUG 3 2018

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Shinnery</i>		API Number <i>30-025-37278</i>	
Property Name <i>New Mexico D</i>		Well No. <i>4</i>	

Surface Location

UL - Lot <i>m</i>	Section <i>27</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>330</i>	N/S Line <i>S</i>	Feet from <i>690</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJ	INJECTOR	SWD	<i>OIL</i>	PRODUCER	GAS	DATE <i>8/3/18</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Pull	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <i>—</i>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <i>—</i>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <i>—</i>
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>Mar. John</i>		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:		<i>JB</i>	
Date: <i>8/3/18</i>	Phone:		
Witness: <i>Bowe</i>			

INSTRUCTIONS ON BACK OF THIS FORM