

HOBBS OCD

AUG 13 2018

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Burgundy Oil + Gas</i>		API Number <i>30-025-02160</i>	
Property Name <i>STATE VACUUM</i>		Well No. <i>#16</i>	

Surface Location

UL - Lot <i>P</i>	Section <i>21</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>990</i>	N/S Line <i>S</i>	Feet From <i>330</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES <i>/</i> NO <i>(NO)</i>	SHUT-IN YES NO <i>(NO)</i>	INJECTOR INJ	SWD <i>(OIL)</i>	PRODUCER GAS	DATE <i>6-29-18</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>N/A</i>	<i>N/A</i>	<i>45</i>	<i>70</i>
Flow Characteristics					
Puff	<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.

Signature: <i>Cindy Campbell</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Cindy Campbell</i>		Entered into RBDMS	
Title: <i>Production Accountant</i>		Re-test	
E-mail Address: <i>ccampbell.bogi@att.net</i>			
Date: <i>6/29/18</i>	Phone: <i>432-684-4033, x-205</i>		
Witness: <i>Gay Holmson</i>			

INSTRUCTIONS ON BACK OF THIS FORM