

HOBBS OCD

AUG 13 2018

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

BRADENHEAD TEST REPORT

RECEIVED <i>Durgundy Oil & Gas</i>		Operator Name	API Number
<i>STATE Vacuum</i>		Property Name	Well No.
			<i>30-025-02167</i>
			<i>#4</i>

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>1C</i>	<i>32</i>	<i>17S</i>	<i>34E</i>	<i>990</i>	<i>N</i>	<i>1650</i>	<i>W</i>	<i>LETA</i>

Well Status

TA'D WELL	SHUT-IN	INJECTOR	SWD	PRODUCER	DATE
YES ☒ NO ☐	YES ☐ NO ☒	INJ ☐	☒	OIL ☐ GAS ☐	<i>6-29-18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>40</i>	<i>40</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.

Signature: <i>Cindy Campbell</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cindy Campbell</i>	Entered into RBDMS
Title: <i>Production Accountant</i>	Re-test <i>ms</i>
E-mail Address: <i>ccampbell.bogi@att.net</i>	
Date: <i>6/29/18</i>	Phone: <i>432-684-4035 x-205</i>
Witness: <i>Deey Johnson</i>	

INSTRUCTIONS ON BACK OF THIS FORM