

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

Operator Name <i>Burgundy Oil + Gas</i>	API Number <i>50-065-02172</i>
Property Name <i>STATE VACCUM</i>	Well No. <i>#5</i>

Surface Location

UL - Lot <i>B3</i>	Section <i>32</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>980</i>	N/S Line <i>N</i>	Feet From <i>2510</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

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

	(A) Surface	(B) Interm (1)	(C) Interm (2)	(D) Prod Casing	(E) Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>40</i>	<i>50</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>Cindy Campbell</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cindy Campbell</i>	Entered into RBDMS
Title: <i>Production Accountant</i>	Re-test <i>[Signature]</i>
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>Deey Robinson</i>	

INSTRUCTIONS ON BACK OF THIS FORM