

HOBBS OCD

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

AUG 20 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name XTO Energy, Inc	API Number 30-025-04510
Property Name Eunice Monument South Unit	Well No. 199

7. Surface Location

UL - Lot H	Section 5	Township 21S	Range 36E	Feet from 5940	N/S Line South	Feet From 660	E/W Line East	County Lea
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Well Status

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	PRODUCER OIL <input checked="" type="radio"/> GAS	DATE 7-12-18
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	Type of Fluid Injected for Waterflood If applies.
Gas or Oil	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	
Water	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	

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

Signature: <i>Luis Cabello</i>	OIL CONSERVATION DIVISION
Printed name: Luis Cabello XTO Energy	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>[Signature]</i>
Date: 7-12-18	
Phone: 575-631-0306	
Witness:	