

AUG 20 2018

RECEIVED

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name XTO Energy, Inc	API Number 30-025-04272
Property Name Eunice Monument South Unit B	Well No. 885

7. Surface Location

Lot - Lot K	Section 14	Township 20S	Range 36E	Feet from 2310	N/S Line South	Feet From 2310	E/W Line West	County Lea
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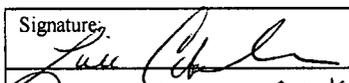
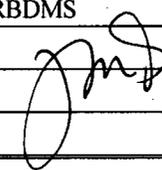
Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	OIL PRODUCER OIL	GAS	DATE 7-2-18
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csng	(E) Tubing
Pressure	∅	∅	N/A	∅	740
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	CO2 ___
Steady Flow	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	WTR ___
Surges	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	GAS ___
Down to nothing	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Type of Fluid
Gas or Oil	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Injected for
Water	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	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: 	OIL CONSERVATION DIVISION
Printed name: Luis C. Bello	Entered into RBDMS
Title:	Re-test 
E-mail Address:	
Date:	Phone: 575 / 631-0306
Witness: 