

HOBBS OCD

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corporation</i>	API Number <i>30-025-41543</i>
Property Name <i>WBDU</i>	Well No. <i>152</i>

1. Surface Location									
UL - Lot <i>M</i>	Section <i>16</i>	Township <i>21S</i>	Range <i>37E</i>		Feet from <i>820</i>	N/S Line <i>S</i>	Feet From <i>820</i>	E/W Line <i>W</i>	County <i>Lea</i>

Well Status									
TA'D WELL YES	☒ NO	SHUT-IN YES	☒ NO	☒ INJ	INJECTOR SWD	PRODUCER OIL	GAS	DATE <i>8/28/18</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>✓</i>	<i>✓</i>		<i>✓</i>	<i>1100</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 Water flow 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>Dustin Locke</i>	OIL CONSERVATION DIVISION
Printed name: <i>Dustin Locke</i>	Entered into RBDMS
Title:	Re-test
E-mail Address: <i>dustin.locke@apachecorp.com</i>	<i>ms</i>
Date: <i>8/28/18</i>	
Phone: <i>575-390-2833</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM