

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

SEP 11 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Robinson</i>	API Number <i>30-025-27190</i> ✓
Property Name <i>Tonto</i>	Well No. <i>9y</i> ✓

7. Surface Location

UL - Lot <i>30N</i>	Section <i>30</i>	Township <i>19S</i>	Range <i>33E</i>	Feet from <i>460</i>	N/S Line <i>S</i>	Feet From <i>2300</i>	E/W Line <i>W</i>	County <i>Lea</i> ✓
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Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJECTOR ☒ INJ	SWD	OIL PRODUCER	GAS	DATE <i>9/11/18</i> ✓
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgng	(E)Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>1200</i> ✓
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	<i>0</i> / N	CO2 —
Steady Flow	Y / N	Y / N	Y / N	Y / <i>0</i>	WTR — ✓
Surges	Y / N	Y / N	Y / N	Y / <i>0</i>	GAS —
Down to nothing	Y / N	Y / N	Y / N	<i>0</i> / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / <i>0</i>	Injected for
Water	Y / N	Y / N	Y / N	Y / <i>0</i>	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: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>9/11/18</i>	Phone:
Witness: <i>[Signature]</i>	