

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

OCT 09 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Shackel Ford O.T.</i>	API Number <i>30-025-30518</i> ✓
Property Name <i>Lusk West Delaware</i>	Well No. <i>#1</i> ✓

7. Surface Location

UL - Lot <i>A</i>	Section <i>20</i>	Township <i>19S</i>	Range <i>32E</i>	Feet from <i>330</i>	N/S Line <i>N</i>	Feet From <i>330</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 <i>INJ</i>	SWD	OIL	PRODUCER GAS	DATE <i>10-9-18</i> ✓
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>10</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>1300</i>
Flow Characteristics					
Pull	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	CO2 ☐
Steady Flow	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	WTR ☒
Surges	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	GAS ☒
Down to nothing	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	Type of Fluid
Gas or Oil	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	Injected for
Water	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> ☒ <i>N</i> ☐	<i>Y</i> / <i>N</i>	<i>Y</i> ☒ <i>N</i> ☐	Water level 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>Zachary Garcia</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	
Phone: <i>575-361-7429</i>	
Witness: <i>Larry Holmson</i>	

INSTRUCTIONS ON BACK OF THIS FORM