

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

BRADENHEAD TEST REPORT

Operator Name <u>TORA</u>		API Number <u>30-025-24334</u>	
Property Name <u>ARCO CRUMP</u>		Well No. <u>2</u>	

7. Surface Location

UL - Lot <u>15</u>	Section <u>1</u>	Township <u>24-S</u>	Range <u>36-E</u>	Feet from <u>1650</u>	N/S Line <u>S</u>	Feet From <u>1650</u>	E/W Line <u>E</u>	County <u>LEA</u>
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Well Status

TA'D WELL YES ☒ NO ☐	SHUT-IN YES ☒ NO ☐	INJECTOR INJ ☒ SWD ☐	PRODUCER OIL ☐ GAS ☐	DATE <u>12-20-18</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>0</u>	<u>/</u>	<u>/</u>	<u>0</u>	<u>0</u>
Flow Characteristics					
Pull	Y / <u>0</u>	Y / N	Y / N	<u>0</u> / N	CO2 <u> </u>
Steady Flow	Y / <u>0</u>	Y / N	Y / N	Y / <u>0</u>	WTR <u> </u>
Surges	Y / <u>0</u>	Y / N	Y / N	Y / <u>0</u>	GAS <u> </u>
Down to nothing	<u>0</u> / N	Y / N	Y / N	<u>0</u> / N	Type of Fluid
Gas or Oil	Y / <u>0</u>	Y / N	Y / N	Y / <u>0</u>	Injected for
Water	Y / <u>0</u>	Y / N	Y / N	Y / <u>0</u>	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:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <u>12-20-18</u>	Phone:		
Witness: <u>Rick Rickman</u>			