

District I
1625 N. French Dr., Hobbs, NM 88240
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HC 100-000

State of New Mexico

FEB 26 2019

Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>SPECIAL Energy</i>	API Number <i>30-025-10646</i>
Property Name <i>WH King</i>	Well No. <i>1</i>

Surface Location									
UL - Lot <i>m</i>	Section <i>6</i>	Township <i>23S</i>	Range <i>37E</i>		Feet from <i>330</i>	N/S Line <i>S</i>	Feet From <i>330</i>	E/W Line <i>W</i>	County <i>LCA</i>

Well Status									
TA'D WELL ☒ YES ☒ NO	SHUT-IN ☒ YES ☒ NO	INJ ☒ YES ☒ NO	SWD ☒ YES ☒ NO	OIL ☒ YES ☒ NO	PRODUCER ☒ YES ☒ NO	DATE <i>2/26/19</i>			

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>/</i>	<i>/</i>	<i>/</i>	<i>/</i>	<i>/</i>
Flow Characteristics					
Pull	<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
Gas or Oil	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Injected for
Water	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</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.

Compressor Runners

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>2/26/19</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM