

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

BRADENHEAD TEST REPORT

Operator Name <i>Occidental Petroleum LTD</i>	API Number <i>30-025-05450</i>
Property Name <i>North Hobbs Unit</i>	Well No. <i>341</i>

2. Surface Location

UL - Lot <i>0</i>	Section <i>14</i>	Township <i>18-S</i>	Range <i>37-E</i>	Feet from <i>660</i>	N/S Line <i>South</i>	Feet From <i>160</i>	E/W Line <i>East</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☒ YES ☐ NO	INJ	INJECTOR SWD	PRODUCER ☒ OIL ☐ GAS	DATE <i>4-15-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>NONE</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 Waterflood 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.

T/A TEST

Signature: <i>Mendy Johnson</i>	OIL CONSERVATION DIVISION
Printed name: <i>MENDY JOHNSON</i>	Entered into RBDMS
Title: <i>ADMIN ASSOC.</i>	Re-test <i>X7</i>
E-mail Address: <i>MENDY - JOHNSON@OXY.COM</i>	
Date: <i>APR 26 2019</i>	
Phone: <i>806-592-0280</i>	
Witness: <i>Shirley Johnson</i>	

INSTRUCTIONS ON BACK OF THIS FORM