

**AUG 19 2019**

**RECEIVED**

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

**BRADENHEAD TEST REPORT**

|                                                         |  |                                   |  |
|---------------------------------------------------------|--|-----------------------------------|--|
| Operator Name<br><b>Apache Oil Corp.</b>                |  | API Number<br><b>30-025-09917</b> |  |
| Property Name<br><b>North East Drinkard Unit (NEDU)</b> |  | Well No.<br><b>704</b>            |  |

**1. Surface Location**

|                      |                      |                        |                     |                         |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><b>N</b> | Section<br><b>15</b> | Township<br><b>21S</b> | Range<br><b>37E</b> | Feet from<br><b>660</b> | N/S Line<br><b>S</b> | Feet From<br><b>1980</b> | E/W Line<br><b>W</b> | County<br><b>Lea</b> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|

**Well Status**

|                                                   |                                                 |                                              |                                                                 |                       |
|---------------------------------------------------|-------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------|-----------------------|
| TA'D WELL<br>YES <input checked="" type="radio"/> | SHUT-IN<br>YES <input checked="" type="radio"/> | INJECTOR<br><input checked="" type="radio"/> | PRODUCER<br>OIL <input type="radio"/> GAS <input type="radio"/> | DATE<br><b>7-9-19</b> |
|---------------------------------------------------|-------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------|-----------------------|

**OBSERVED DATA**

|                             | (A) Surface                          | (B) Intern(1) | (C) Intern(2) | (D) Prod Csg                         | (E) Tubing                              |
|-----------------------------|--------------------------------------|---------------|---------------|--------------------------------------|-----------------------------------------|
| Pressure                    | <b>Ø</b>                             | <b>—</b>      | <b>—</b>      | <b>Ø</b>                             | <b>1170</b>                             |
| <b>Flow Characteristics</b> |                                      |               |               |                                      |                                         |
| Puff                        | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | CO2 <input type="checkbox"/>            |
| Steady Flow                 | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | WTR <input checked="" type="checkbox"/> |
| Surges                      | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | GAS <input type="checkbox"/>            |
| Down to nothing             | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | Type of Fluid                           |
| Gas or Oil                  | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | Injected for                            |
| Water                       | Y / <input checked="" type="radio"/> | Y / N         | Y / N         | Y / <input checked="" type="radio"/> | Water flowed 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: <b>Tracy Cole</b>    |                            | OIL CONSERVATION DIVISION |  |
| Printed name: <b>Tracy Cole</b> |                            | Entered into RBDMS        |  |
| Title:                          |                            | Re-test <b>X</b>          |  |
| E-mail Address:                 |                            |                           |  |
| Date: <b>7-9-19</b>             | Phone: <b>575-441-5196</b> |                           |  |
| Witness:                        |                            |                           |  |

INSTRUCTIONS ON BACK OF THIS FORM