

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

BRADENHEAD TEST REPORT

|                                       |  |                                   |
|---------------------------------------|--|-----------------------------------|
| Operator Name<br><b>Oxy</b>           |  | API Number<br><b>30-025-07500</b> |
| Property Name<br><b>N. Hobbs G/SA</b> |  | Well No.<br><b>#344</b>           |

| Surface Location     |                      |                        |                     |  |                          |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><b>0</b> | Section<br><b>31</b> | Township<br><b>18S</b> | Range<br><b>38E</b> |  | Feet from<br><b>1315</b> | N/S Line<br><b>S</b> | Feet From<br><b>1325</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |

| Well Status      |                                     |                                      |               |                                      |                 |                 |     | DATE           |
|------------------|-------------------------------------|--------------------------------------|---------------|--------------------------------------|-----------------|-----------------|-----|----------------|
| TA'D WELL<br>YES | <input checked="" type="radio"/> NO | <input checked="" type="radio"/> YES | SHUT-IN<br>NO | <input checked="" type="radio"/> INJ | INJECTOR<br>SWD | PRODUCER<br>OIL | GAS | <b>7-29-19</b> |

OBSERVED DATA

|                      | (A) Surface | (B) Intern(1)   | (C) Intern(2) | (D) Prod Casing | (E) Tubing                                                |
|----------------------|-------------|-----------------|---------------|-----------------|-----------------------------------------------------------|
| Pressure             | <b>0</b>    | <b>Cemented</b> | <b>N/A</b>    | <b>0</b>        | <b>0</b>                                                  |
| Flow Characteristics |             |                 |               |                 |                                                           |
| Pull                 | <b>Y/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>Y/N</b>      | CO2 <input type="checkbox"/>                              |
| Steady Flow          | <b>Y/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>Y/N</b>      | WTR <input type="checkbox"/>                              |
| Surges               | <b>Y/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>Y/N</b>      | GAS <input type="checkbox"/>                              |
| Down to nothing      | <b>0/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>0/N</b>      | Type of Fluid<br>Injected for<br>Waterflood if<br>applies |
| Gas or Oil           | <b>Y/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>Y/N</b>      |                                                           |
| Water                | <b>Y/N</b>  | <b>Y/N</b>      | <b>Y/N</b>    | <b>Y/N</b>      |                                                           |

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**POST WORKOVER**

|                               |        |                           |
|-------------------------------|--------|---------------------------|
| Signature:                    |        | OIL CONSERVATION DIVISION |
| Printed name:                 |        | Entered into RBDMS        |
| Title:                        |        | Re-test                   |
| E-mail Address:               |        | <b>X7</b>                 |
| Date:                         | Phone: |                           |
| Witness: <b>Gary Robinson</b> |        |                           |

INSTRUCTIONS ON BACK OF THIS FORM