

HOBBS OCD

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

BRADENHEAD TEST REPORT

RECEIVED AUG 22 2019

Operator Name <i>Occidental Permian</i>	API Number <i>30-025-34374</i>
Property Name <i>North Hobbs UNIT</i>	Well No. <i>531</i>

2. Surface Location									
UL - Lot <i>J</i>	Section <i>32</i>	Township <i>18-S</i>	Range <i>38-E</i>		Feet from <i>2120</i>	N/S Line <i>South</i>	Feet From <i>1500</i>	E/W Line <i>East</i>	County <i>Lea</i>

Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJ	INJECTOR SWD	PRODUCER ☒ OIL	GAS	DATE <i>8-14-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>5</i>	<i>NA</i>	<i>NA</i>	<i>486</i>	<i>524</i>
Flow Characteristics					
Puff	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	CO ₂ ☐
Steady Flow	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	WTR ☐
Surges	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	GAS ☐
Down to nothing	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	Type of Fluid Injected for Waterflood if applies
Gas or Oil	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	
Water	☐ Y / ☒ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	

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

Signature: <i>Kelcee Eiston</i>		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test <i>212</i>
E-mail Address:		
Date:	Phone:	
Witness:		

INSTRUCTIONS ON BACK OF THIS FORM