

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

HOBBS OCD

SEP 09 2019

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corporation</i>		API Number <i>#30-025-33951</i>
Property Name <i>WARR STATE AC 1</i>		Well No. <i>7</i>

1. Surface Location

UL - Lot <i>F</i>	Section <i>31</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>2036'</i>	N/S Line <i>FNL</i>	Feet From <i>2089'</i>	E/W Line <i>FWL</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>7/11/19</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>0</i>	<i>-</i>	<i>20</i>	<i>120</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 Water/Oil/Gas 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.

Signature:		OIL CONSERVATION DIVISION	
Printed name: <i>Albert DeLa Cruz</i>		Entered into RBDMS	
Title: <i>Pumper</i>		Re-test <i>JCJ</i>	
E-mail Address: <i>albert.de la Cruz@apachecorp.com</i>			
Date:	Phone:		
Witness:			