

HOBBS OCD

AUG 12 2019

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Chevron</i>	API Number <i>30-025-30827</i>
Property Name <i>WDDV</i>	Well No. <i>105</i>

Surface Location

UL - Lot <i>K</i>	Section <i>32</i>	Township <i>24S</i>	Range <i>38E</i>	Feet from <i>1347</i>	N/S Line <i>S</i>	Feet From <i>1373</i>	E/W Line <i>W</i>	County <i>LEE</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR ☒ INJ	SWD	OIL PRODUCER	GAS	DATE <i>7/1/2019</i>
--	--	--	-----	--------------	-----	-------------------------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>0</i>	<i>0</i>	<i>0</i>	<i>50</i>	<i>1250</i>
Flow Characteristics					
Pull	<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.

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

INSTRUCTIONS ON BACK OF THIS FORM