

HOBBS OCD
 AUG 30 2019
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State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name CML EXPLORED Cooper 24 Federal	API Number 30-025-38348
Property Name Cooper 24 Federal	Well No. 2

Surface Location									
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County	
I	24	17S	32E	1650	S	810	E	Lea	

Well Status								DATE
TA'D WELL	SHUT-IN	INJECTOR	PRODUCER					
YES <input type="radio"/>	YES <input type="radio"/>	INJ <input type="radio"/>	OIL <input type="radio"/>	GAS <input type="radio"/>				8/26/19
NO	NO	SWD						

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	0	0	N/A	0	1000
Flow Characteristics					
Pull	Y/N	Y/N	Y/N	Y/N	CO2 <input type="checkbox"/>
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR <input type="checkbox"/>
Surges	Y/N	Y/N	Y/N	Y/N	GAS <input type="checkbox"/>
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.

A. Surface casing - no pressure, no blow.
B. Intermediate casing - no pressure, no blow.
D. Production casing - no pressure, no blow. Hooked up pump truck with chart recorder. Ran 30 minute MIT w/ 520 psi on the casing. Held good.

Signature:	OIL CONSERVATION DIVISION
Printed name: Brad Ashworth	Entered into RBDMS
Title: Wellsite Supervisor	Re-test
E-mail Address: ashworthb@cmlxp.com	
Date: 8/27/19	Phone: 325-574-6297
Witness:	

PERFORMING BRADENHEAD TEST

General Procedure for Bradenhead Test

- Identify: All valves prior to testing
- Gauges: Install on each casing string to record pressure.
- Assure: That all valves are in good working condition and closed at least 24 hours prior to testing.
- Open: Each valve (Bradenhead, intermediate and casing valves) is to be opened separately.
- Check Gauges: Record pressure on each gauge and casing string on BHT form. Open valves to atmosphere and record results on BHT form.

Designate what applies to the result of opening the valves for each string:

- | | |
|------------------------|-----------|
| • Blow or Puff | Yes or No |
| • Bled down to Nothing | Yes or No |
| • Steady Flow | Yes or No |
| • Oil or Gas | Yes or No |
| • Water | Yes or No |

Start: Injection or SWD pump so tubing pressure can be read.

Instructions below apply to the District 1 Hobbs office since this must be reported on a form.

In case of pressure:

1. Record pressure reading on gauge.
2. Bleed and note time elapsed to bleed down.
3. Leave valve open for additional observation.
4. Note any fluids expelled.

In absence of Pressure:

1. Leave valve open for additional observation.
2. Note types of fluids expelled.
3. Note if fluids persist throughout test.

Note: Tubing pressure on injection or SWD wells.

Test will be signed by person performing test with a contact phone number.