

HOBBS OCD

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Burgundy</i>		API Number <i>30-025-06167</i>	
Property Name <i>Evance Monument</i>		Well No. <i>#30</i>	

1. Surface Location

UL - Lot <i>0</i>	Section <i>19</i>	Township <i>20S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES <i>(NO)</i>	SHUT-IN YES <i>(NO)</i>	INJECTOR <i>(INJ)</i>	SWD	OIL	PRODUCER GAS	DATE <i>9-18-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>1400</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 WTR ☒ GAS ☐ Type of Fluid Injected for Waterflood if apples
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
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: <i>Cindy Campbell</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Cindy Campbell</i>		Entered into RBDMS	
Title: <i>Prod. Acct.</i>		Re-test	
E-mail Address: <i>ccampbell@burgundy-oil.com</i>			
Date: <i>9/18/19</i>	Phone: <i>432-684-51033</i>		
Witness: <i>Gary Johnson</i>			

INSTRUCTIONS ON BACK OF THIS FORM