

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

BRADENHEAD TEST REPORT

Operator Name <i>Cog</i>		API Number <i>30-025-43474</i>	
Property Name <i>Lightning 1 State SWD</i>		Well No. <i>002</i>	

1 Surface Location

UL - Lot <i>F</i>	Section <i>01</i>	Township <i>21S</i>	Range <i>33E</i>	Feet from <i>3780</i>	N/S Line <i>S</i>	Feet from <i>2300</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

YES	TA'D WELL <i>(NO)</i>	YES	SHUT-IN <i>(NO)</i>	INJ	INJECTOR <i>(SWD)</i>	OIL	PRODUCER	GAS	DATE <i>10-16-19</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>0</i>	<i>0</i>	<i>750</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 Inferred for Water/Gas if applies
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>Duane Virde</i>		OIL CONSERVATION DIVISION	
Printed name <i>Duane Virde</i>		Entered into RBDMS	
Title <i>Asst SWD Foreman</i>		Re-test <i>[Signature]</i>	
E-mail Address <i>MVirde@concho.com</i>			
Date <i>10-16-19</i>	Phone <i>1-878-7906-9035</i>		
Witness <i>[Signature]</i>			

INSTRUCTIONS ON BACK OF THIS FORM