

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

BRADENHEAD TEST REPORT

Operator Name <i>Apache Corp</i>		API Number <i>30-025-40081</i>
Property Name <i>JL Muncy</i>		Well No. <i>15</i>

1. Surface Location

UL Loc <i>H</i>	Section <i>24</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>2310</i>	N/S Line <i>N</i>	Feet From <i>990</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>12-3-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	<i>5</i>			<i>30</i>	<i>80</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
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Craig Coombes</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Craig Coombes</i>		Entered into RBDMS	
Title <i>Tech</i>		Re-test	
E-mail Address: <i>Craig.Coombes@apachecorp.com</i>			
Date: <i>12-3-19</i>	Phone: <i>575/513-5626</i>		
Witness: <i>Sam Kohn</i>			

INSTRUCTIONS ON BACK OF THIS FORM