

HOBBS OCD

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

DEC 26 2019

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Forty Acres</i>		API Number <i>30-025-45480</i>
Property Name <i>West Eumont Unit</i>		Well dip

Surface Location								
UL - Lot <i>N</i>	Section <i>26</i>	Township <i>26-S</i>	Range <i>36-E</i>	Feet from <i>10</i>	N/S Line <i>S</i>	Feet From <i>2481</i>	E/W Line <i>W</i>	County <i>Lea</i>

Well Status									
YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	<i>INJ</i>	INJECTOR	SWD	PRODUCER	GAS	DATE <i>12-10-19</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>
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 Wellhead 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.

MIT
(Greg) Parker Energy Support
1000psi chart recorder ser#5162
cal 6-18-19

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		<i>X7</i>
Date:	Phone:	
Witness:		

INSTRUCTIONS ON BACK OF THIS FORM

HOBBS OCD

DEC 26 2019

RECEIVED

30-025-45480

