

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

HOBBS

JAN 02 2020

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Forty acres</i>		API Number <i>30-025-44210</i>
Property Name <i>West Fumont unit</i>		Well No. <i>214</i>

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet from	E/W Line	County
<i>B</i>	<i>2</i>	<i>21S</i>	<i>35E</i>	<i>2485</i>	<i>N</i>	<i>1335</i>	<i>E</i>	<i>Lea</i>

Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR <i>(NO)</i>	PRODUCER OIL	GAS	DATE <i>12-7-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Case	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>B61</i>
Flow Characteristics					
Pull	<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>	Entered for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	W's removed if

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

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

INTERPRETING IN BACK OF THIS TEST.