

HOBBS OCD

DEC 31 2019

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

BRADENHEAD TEST REPORT

Operator Name <i>McDonnold Operating</i>		API Number <i>30-025-11169</i>	
Property Name <i>Langlie Jack</i>		Well No. <i>#14</i>	

Surface Location

UL - Lot <i>10</i>	Section <i>20</i>	Township <i>24S</i>	Range <i>37E</i>	Feet from	N/S Line	Feet From	E/W Line	County <i>Lea</i>
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR <i>INJ</i>	PRODUCER OIL	GAS	DATE <i>8-30-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Cmg	(E)Tubing
Pressure	<i>0</i>	<i>NA</i>	<i>NA</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 ☐
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 injected for waterflood if applies
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>Lane Rosen</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Lane Rosen</i>		Entered into RBDMS	
Title: <i>Pumpman</i>		Re-test	
E-mail Address: <i>lane-rosen44@yahoo.com</i>			
Date: <i>8-30-19</i>	Phone:		
	Witness:		

INSTRUCTIONS ON BACK OF THIS FORM