

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>30-025-23685</i>	
Property Name <i>Jack A 29</i>		Well No. <i>#6</i>	

2 Surface Location

UL - Lot <i>G</i>	Section <i>29</i>	Township <i>24S</i>	Range <i>37E</i>	Feet from	N/S Line	Feet From	E/W Line	County <i>Lee</i>
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Well Status

TA'D WELL YES	<i>NO</i>	SHUT-IN YES	<i>NO</i>	INJECTOR <i>INJ</i>	SWD	OIL PRODUCER GAS	DATE <i>8-30-19</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>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>N / Y</i>	<i>Y / N</i>	<i>Y / N</i>	<i>N / Y</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>Lana Rogers</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Lana Rogers</i>		Entered into RBDMS	
Title: <i>Pumpjack</i>		Re-test	
E-mail Address: <i>lana.rogers44@yahoo</i>			
Date: <i>8-30-19</i>	Phone: <i>575 390-1620</i>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM