

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

Operator Name ConocoPhillips Company HOBBS CCD		API Number 3002502964
Well Name East Vacuum GB-SA Unit 3202		Well No 004
BEE North		RECEIVED

Surface Location

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
1	32	17S	35E	1987	S	660	E	LEA

Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	INJECTOR INJ	PRODUCER SWD	<input checked="" type="radio"/> OIL	GAS	DATE 3-2-20
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OBSERVED DATA

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure	Ø	Ø	N/A	137	139
Flow Characteristics					CO2 ___
Puff	Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / N	Y / N	Y / N	WTR ___
Steady Flow	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / N	Y / N	GAS ___
Surges	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / N	Y / N	
Down to Nothing	<input checked="" type="radio"/> Y / N	<input checked="" type="radio"/> Y / N	Y / N	Y / N	
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / N	Y / N	
Water	Y / <input checked="" type="radio"/> N	Y / <input checked="" type="radio"/> N	Y / N	Y / N	

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

Signature: <i>B. Hunter North</i>	OIL CONSERVATION DIVISION
Print name: <i>B. Hunter North</i>	Entered in RBDMS
Title: <i>MSO</i>	Re-test
E-mail Address: <i>Hunter.North@contractor.conocophillips.com</i>	<i>X F</i>
Date: <i>3-2-20</i>	
Phone: <i>575-704-6032</i>	
Witness:	