

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

Operator Name <b>ConocoPhillips Company</b>	API Number <b>3002502916</b>
Well Name <b>East Vacuum GB-SA Unit 2864</b>	Well No <b>013</b>
BEE: Cesar	

**Surface Location**

UL - Lot	SEC	Tnsp	Range	Feet From	N/S Line	Feet From	E/W Line	County
D	28	17S	35E	660	N	660	W	LEA

**Well Status**

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	INJECTOR INJ	SWD	<input checked="" type="radio"/> OIL	PRODUCER GAS	DATE <b>3-30-20</b>
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**OBSERVED DATA**

	(A)Surface	(B)Interm (1)	(C)Interm (2)	(D) Prod Csg	(E)Tubing
Pressure				<b>418</b>	<b>48</b>
Flow Characteristics					CO2
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	Y / N	Y / N	Y / N	WTR
Steady Flow	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	GAS
Surges	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	
Down to Nothing	<input checked="" type="radio"/> Y / <input type="radio"/> N	Y / N	Y / N	Y / N	
Gas or Oil	Y / <input checked="" type="radio"/> N	Y / N	Y / N	Y / N	
Water	Y / <input checked="" type="radio"/> N	Y / 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.

*Small puff down to nothing*

Signature: <i>Cesar Sigala</i>	OIL CONSERVATION DIVISION
Print name: <i>Cesar Sigala</i>	Entered in RBDMS
Title: <i>MSO</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>Cesar.Sigala@contractor.conocophillips.com</i>	
Date: <i>3-30-20</i>	Phone: <i>575-659-9053</i>
Witness:	

