

HOBBS OCD

JUL 07 2020

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Dry USA</i>		API Number <i>30-025-10391</i>	
Property Name <i>EM Elliott</i>		Well No. <i>3</i>	

Surface Location

UL - Lot <i>C</i>	Section <i>22C</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>510</i>	N/S Line <i>N</i>	Feet from <i>2130</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>6/19/20</i>
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OBSERVED DATA

	(A) Surface	(B) Intern(1)	(C) Intern(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>0</i>	<i>0</i>		<i>250</i>	<i>0</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 Injected for Washover 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.

A, B - had 0 pressure, pulled, blew down to nothing
D - well is selling from casing with throttle valve, continues flow
E - 0 pressure on tubing

Signature: <i>Josh Latimer</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Josh Latimer</i>		Entered into RBDMS	
Title: <i>Production Tech II</i>		Re-test <i>X</i>	
E-mail Address: <i>joshua-latimer@dry.com</i>			
Date: <i>6/19/20</i>	Phone: <i>575-414-9188</i>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM