

HOBBS OCD

AUG 18 2020

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Apache Oil Corp.</i>		* APT Number <i>30-025-06610</i>	
Property Name <i>North East Drinkard Unit (NEDU)</i>		Well No. <i>609</i>	

7. Surface Location

UL - Lot <i>B</i>	Section <i>15</i>	Township <i>21S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>Leq</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR ☒ INJ	SWD	OIL	PRODUCER	GAS	DATE <i>4-17-20</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>—</i>	<i>—</i>	<i>Ø</i>	<i>1175</i>
Flow Characteristics					
Puff	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	CO2 ☐
Steady Flow	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	WTR ☒
Surges	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	GAS ☐
Down to nothing	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	Type of Fluid
Gas or Oil	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	Injected for
Water	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	☒ Y / ☒ N	Water flow if applies

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

Signature: <i>Tracy Cole</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Tracy Cole</i>		Entered into RBDMS	
Title:		Re-test <i>X</i>	
E-mail Address:			
Date:	Phone: <i>575-441-5196</i>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM