

Diackel
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HOBBS OGD

AUG 25 2020

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Fasken Oil & Ranch, LTD.</i>	API Number <i>30-025-05046</i>
Property Name <i>Wingerd</i>	Well No. <i>#013</i>

Surface Location									
UL - 1st <i>P</i>	Section <i>24</i>	Township <i>12S</i>	Range <i>37E</i>		Feet from <i>990</i>	NS Line <i>S</i>	Feet from <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>

Well Status									
TA'D WELL YES	☒ NO	YES	SHUT-IN ☒ NO	INJ	INJECTOR ☒ SWD	OIL	PRODUCER GAS	DATE <i>8-10-20</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>NA</i>	<i>10</i>	<i>150</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>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Wear/Good 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>Neil Weeks</i>	OIL CONSERVATION DIVISION
Printed name: <i>Neil Weeks</i>	Entered into RBDMS
Title: <i>Production Foreman</i>	Re-test
E-mail Address: <i>neil@ecfor.com</i>	
Date: <i>8-10-20</i>	
Phone: <i>432-661-3136</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM