

AUG 28 2017

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name SABER OIL & GAS		API Number 30-025-01976	
Property Name STATE X		Well No. #1	

Surface Location

UL - Lot A	Section 7	Township 17s	Range 34e	Feet from 990	N/S Line N	Feet From 330	E/W Line E	County LEA
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Well Status

TA'D WELL YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJECTOR INJ <input type="checkbox"/> SWD <input checked="" type="checkbox"/>	PRODUCER GAS <input type="checkbox"/> OIL <input checked="" type="checkbox"/>	DATE 8-21-17
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	N/A	N/A	30	30
Flow Characteristics					
Puff	Y/N <input checked="" type="checkbox"/>	Y/N	Y/N	Y/N	CO2 ___
Steady Flow	Y/N <input checked="" type="checkbox"/>	Y/N	Y/N	Y/N	WTR ___
Surges	Y/N <input checked="" type="checkbox"/>	Y/N	Y/N	Y/N	GAS ___
Down to nothing	<input checked="" type="checkbox"/> Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N <input checked="" type="checkbox"/>	Y/N	Y/N	Y/N	Injected for
Water	Y/N <input checked="" type="checkbox"/>	Y/N	Y/N	Y/N	Water flood 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:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date:	
Phone:	
Witness: Gary Robinson	
399-3220	