

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

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

## BRADENHEAD TEST REPORT

|                                               |  |                                   |  |
|-----------------------------------------------|--|-----------------------------------|--|
| Operator Name<br><i>MorningStar Operating</i> |  | API Number<br><i>30-025-40122</i> |  |
| Property Name<br><i>New Mexico R NCT-4</i>    |  | Well No.<br><i>7</i>              |  |

## 7. Surface Location

|                      |                     |                        |                     |                         |                        |                         |                        |                      |
|----------------------|---------------------|------------------------|---------------------|-------------------------|------------------------|-------------------------|------------------------|----------------------|
| UL - Lot<br><i>D</i> | Section<br><i>7</i> | Township<br><i>18S</i> | Range<br><i>35E</i> | Feet from<br><i>990</i> | N/S Line<br><i>FNL</i> | Feet From<br><i>490</i> | E/W Line<br><i>FWL</i> | County<br><i>LEA</i> |
|----------------------|---------------------|------------------------|---------------------|-------------------------|------------------------|-------------------------|------------------------|----------------------|

## Well Status

|                                                                                  |                                                                                |                   |                   |                                                     |                        |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------------------|-------------------|-----------------------------------------------------|------------------------|
| TA'D WELL<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | SHUT-IN<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | INJ<br><i>N/A</i> | SWD<br><i>NIL</i> | PRODUCER<br><input checked="" type="checkbox"/> GAS | DATE<br><i>5-16-24</i> |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------------------|-------------------|-----------------------------------------------------|------------------------|

## OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Casing | (E)Tubing                    |
|----------------------|------------|--------------|--------------|----------------|------------------------------|
| Pressure             | <i>-0-</i> |              |              | <i>-0-</i>     | <i>n/a</i>                   |
| Flow Characteristics |            |              |              |                |                              |
| Puff                 | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>     | CO2 <input type="checkbox"/> |
| Steady Flow          | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>     | WTR <input type="checkbox"/> |
| Surges               | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>     | GAS <input type="checkbox"/> |
| 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>     | 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.

*Initial TA*

|                                    |                            |                           |  |
|------------------------------------|----------------------------|---------------------------|--|
| Signature: <i>[Signature]</i>      |                            | OIL CONSERVATION DIVISION |  |
| Printed name: <i>Kevin Bennett</i> |                            | Entered into RBDMS        |  |
| Title:                             |                            | Re-test                   |  |
| E-mail Address:                    |                            |                           |  |
| Date: <i>5-16-24</i>               | Phone: <i>575-513-8156</i> |                           |  |
| Witness:                           |                            |                           |  |

INSTRUCTIONS ON BACK OF THIS FORM

*GR*

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 349236

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>MorningStar Operating LLC<br>400 W 7th St<br>Fort Worth, TX 76102 | OGRID:<br>330132                                           |
|                                                                                | Action Number:<br>349236                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| kfortner   | None      | 6/4/2024       |