

District I  
1623 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><b>MORNING STAR PARTNERS</b> |  | API Number<br><b>30-025-02944</b> |
| Property Name<br><b>CENTRAL VACUUM UNIT</b>   |  | Well No.<br><b>32</b>             |

## 2. Surface Location

|                      |                      |                        |                     |                         |                      |                         |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><b>P</b> | Section<br><b>30</b> | Township<br><b>17S</b> | Range<br><b>35E</b> | Feet from<br><b>660</b> | N/S Line<br><b>S</b> | Feet From<br><b>660</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

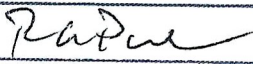
## Well Status

|                                                                            |                                                                          |                                       |                                  |                                                                     |                           |                       |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------|----------------------------------|---------------------------------------------------------------------|---------------------------|-----------------------|
| TA'D WELL<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | SHUT-IN<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | INJ<br>INJECTOR <input type="radio"/> | SWD<br>SWD <input type="radio"/> | OIL <input checked="" type="radio"/> PRODUCER <input type="radio"/> | GAS <input type="radio"/> | DATE<br><b>3-8-23</b> |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------|----------------------------------|---------------------------------------------------------------------|---------------------------|-----------------------|

## OBSERVED DATA

|                      | (A)Surface                             | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing     |
|----------------------|----------------------------------------|--------------|--------------|-------------|---------------|
| Pressure             | <b>0</b>                               |              |              | <b>100</b>  | <b>260</b>    |
| Flow Characteristics |                                        |              |              |             |               |
| Puff                 | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / N       | CO2           |
| Steady Flow          | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / N       | WTR           |
| Surges               | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / N       | GAS           |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N        | Y / N        | Y / N       | Type of Fluid |
| Gas or Oil           | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / N       | Injected for  |
| Water                | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / N       | Waterflood 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: <b>RICHARD PAUL</b>                                                              |                             | Entered into RBDMS        |
| Title: <b>LEASE OPERATOR</b>                                                                   |                             | Re-test                   |
| E-mail Address: <b>RPAUL@CTFIELDVCS.COM</b>                                                    |                             |                           |
| Date: <b>3-8-23</b>                                                                            | Phone: <b>(817)739-5643</b> |                           |
| Witness:                                                                                       |                             |                           |

INSTRUCTIONS ON BACK OF THIS FORM

**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 200637

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>MorningStar Operating LLC<br>400 W 7th St<br>Fort Worth, TX 76102 | OGRID:<br>330132                                           |
|                                                                                | Action Number:<br>200637                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| kfortner   | None      | 9/17/2024      |