

JUL 20 2015

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

RECEIVED

BRADENHEAD TEST REPORT

OGRID # 3044

Operator Name <i>Quangdy Oil & Gas of NM, Inc.</i>	API Number <i>30-025-02161</i>
Property Name <i>State Vacuum</i>	Well No. <i>6</i>

Surface Location									
UL - Lot <i>H</i>	Section <i>31</i>	Township <i>17S</i>	Range <i>34E</i>		Feet from <i>2310</i>	N/S Line <i>N</i>	Feet From <i>330</i>	E/W Line <i>E</i>	County <i>Lea</i>

Well Status									
YES TA'D WELL	NO	YES SHUT-IN	NO	INJ	INJECTOR	SWD	OIL PRODUCER	GAS	DATE <i>5/5/15</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>2/A</i>	<i>2/A</i>	<i>Ø</i>	<i>Ø</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	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.

BL 8/3/2015

Signature: <i>Cindy Campbell</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cindy Campbell</i>	Entered into RBDMS
Title: <i>Production Acpt.</i>	Re-test
E-mail Address: <i>ccampbell.bogi@att.net</i>	
Date: <i>5/5/15</i>	Phone: <i>432-684-4033</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

AUG 04 2015