

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

JUL 17 2015

BRADENHEAD TEST REPORT

RECEIVED

|                                                            |                                     |
|------------------------------------------------------------|-------------------------------------|
| Operator Name<br><i>Burgundy Oil &amp; Gas of NM, Inc.</i> | API Number<br><i>30-025-27991 -</i> |
| Property Name<br><i>State Vacuum Unit</i>                  | Well No.<br><i>22 -</i>             |

Surface Location

|                      |                      |                        |                     |                          |                      |                          |                      |                        |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|------------------------|
| UL - Lot<br><i>F</i> | Section<br><i>32</i> | Township<br><i>17S</i> | Range<br><i>34E</i> | Feet from<br><i>2500</i> | N/S Line<br><i>N</i> | Feet From<br><i>1575</i> | E/W Line<br><i>N</i> | County<br><i>LCA -</i> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|------------------------|

Well Status

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

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                                                 |
|----------------------|------------|--------------|--------------|-------------|-----------------------------------------------------------|
| Pressure             | <i>φ</i>   | <i>N/A</i>   | <i>N/A</i>   | <i>35</i>   | <i>35</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<br>Injected for<br>Waterflood if<br>applies |
| Gas or Oil           | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  |                                                           |
| Water                | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  |                                                           |

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

*BS 8/3/2015*

|                                               |                           |
|-----------------------------------------------|---------------------------|
| Signature: <i>Cindy Campbell</i>              | OIL CONSERVATION DIVISION |
| Printed name: <i>Cindy Campbell</i>           | Entered into RBDMS        |
| Title: <i>Production Acct.</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