

DEC 24 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Legacy</i>	API Number <i>30-025-32633</i>
Property Name <i>South Trustis</i>	Well No. <i>295</i>

Surface Location

UL - Lot <i>D</i>	Section <i>36</i>	Township <i>25S</i>	Range <i>37E</i>	Feet from <i>1100</i>	N/S Line <i>N</i>	Feet From <i>300</i>	E/W Line <i>W</i>	County <i>LCA</i>
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	INJECTOR INJ	SWD	OIL	PRODUCER GAS	DATE <i>9/10/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>N/A</i>	<i>N/A</i>	<i>Ø</i>	<i>300</i>
Flow Characteristics					
Puff	<i>Y / Ø</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <i>X</i>
Steady Flow	<i>Y / Ø</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <i>X</i>
Surges	<i>Y / Ø</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <i>—</i>
Down to nothing	<i>Ø / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Ø / 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>	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:	<i>BS 1/5/16</i>
Printed name:	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS
E-mail Address:	Re-test
Date: <i>9/10/15</i>	Phone:
Witness: <i>John Bowe</i>	

INSTRUCTIONS ON BACK OF THIS FORM

JAN 05 2016