

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

BRADENHEAD TEST REPORT

Operator Name Cross Timbers Energy, LLC	API Number 3002531446
Property Name SOUTHEAST MALJAMAR GB/SA UNIT	Well No. 609

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
L	29	17S	33E	1920	FSL	450	FWL	LEA

Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input checked="" type="checkbox"/> SWD <input type="checkbox"/>	OIL <input type="checkbox"/> GAS <input type="checkbox"/>	2/25/16

OBSERVED DATA


	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	∅	N/A	N/A	∅	2000
Flow Characteristics					
Puff	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	CO2 _____
Steady Flow	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	WTR. <input checked="" type="checkbox"/>
Surges	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	GAS _____
Down to nothing	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	If applicable type
Gas or Oil	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	fluid injected for
Water	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Waterflood

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK	
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Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

BS 3/9/16

Signature: 	OIL CONSERVATION DIVISION
Printed name: KBENNETT	Entered into RBDMS BS
Title: Lease Operator	Re-test
E-mail Address: kbennett@ctfieldsvcs.com	
Date: 2/25/16	Phone: 575-513-8156
Witness: 