

NOV 19 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 Reserves Operations LP</i>	API Number <i>3002511493</i>
Property Name <i>LJU</i>	Well No. <i>85</i>

Surface Location

UL - Lot <i>P</i>	Section <i>8</i>	Township <i>25N</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TA'D WELL	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SHUT-IN	<input checked="" type="checkbox"/> INJ <input type="checkbox"/> SWD INJECTOR	<input type="checkbox"/> OIL PRODUCER	<input type="checkbox"/> GAS	DATE <i>7/8/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ___
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ___
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ___
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applicable
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.

A-D. Gas

Signature: <i>Steve Pittman</i>	<i>B8 11/24/2015</i>
Printed name: <i>Steve Pittman</i>	OIL CONSERVATION DIVISION
Title: <i>WellTech</i>	Entered into RBDMS <i>B8</i>
E-mail Address:	Re-test
Date: <i>9/15/15</i>	Phone: <i>432 312 4757</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 30 2015