

NOV 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>Logan</i>	API Number <i>30-025-00284</i>
Property Name <i>Rock Queen</i>	Well No. <i>106</i>

Surface Location									
UL - Hot <i>N</i>	Section <i>19</i>	Township <i>13S</i>	Range <i>32E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>LJA</i>	

Well Status									
TA'D WELL YES	<u>NO</u>	SHUT-IN YES	NO	<u>INJ</u>	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>7/30/15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>90</i>	<i>1000</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input checked="" 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 Injected for Waterflood if 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.

*csd down to zero*

*B8 12/9/15*

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS <i>GB</i>
Title:	Re-test
E-mail Address:	
Date: <i>7/30/15</i>	Witness: <i>George Dow</i>

INSTRUCTIONS ON BACK OF THIS FORM

DEC 11 2015