

JUN 14 2016

RECEIVED

District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name XTO Energy, Inc	API Number 30-025-04419
Property Name Eunice Monument South Unit	Well No. 162

7. Surface Location

UL - Lot 1	Section 36	Township 20S	Range 36E	Feet from 1980	N/S Line South	Feet From 660	E/W Line East	County Lea
---------------	---------------	-----------------	--------------	-------------------	-------------------	------------------	------------------	---------------

Well Status

TA'D WELL YES <input checked="" type="checkbox"/> NO	SHUT-IN YES NO	INJECTOR <input checked="" type="checkbox"/> INJ SWD	PRODUCER OIL GAS	DATE 5-10-2016
---	-------------------	---	---------------------	-------------------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	700
Flow Characteristics					
Puff	Y/ <input checked="" type="checkbox"/> N	Y/N	Y/N	Y/ <input checked="" type="checkbox"/> N	CO2 <input checked="" type="checkbox"/>
Steady Flow	Y/ <input checked="" type="checkbox"/> N	Y/N	Y/N	Y/ <input checked="" type="checkbox"/> N	WTR <input checked="" type="checkbox"/>
Surges	Y/ <input checked="" type="checkbox"/> N	Y/N	Y/N	Y/ <input checked="" type="checkbox"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="checkbox"/> Y/N	Y/N	Y/N	<input checked="" type="checkbox"/> Y/N	Type of Fluid Injected for Waterflood if applies
Gas or Oil	Y/ <input checked="" type="checkbox"/> N	Y/N	Y/N	Y/ <input checked="" type="checkbox"/> N	
Water	Y/ <input checked="" type="checkbox"/> N	Y/N	Y/N	Y/ <input checked="" type="checkbox"/> N	

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

Signature: <i>Alan Miller - XTO Energy</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test <i>AMS</i>
E-mail Address:	
Date: 5-13-2016	Phone: 575-441-1641
Witness:	