

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

SEP 14 2016

RECEIVED

BRADENHEAD TEST REPORT

|                                                     |                                    |
|-----------------------------------------------------|------------------------------------|
| Operator Name<br><b>Fulfer Oil &amp; Cattle LLC</b> | API Number<br><b>3002511484000</b> |
| Property Name<br><b>South Langlie Jal Unit</b>      | Well No.<br><b>#8</b>              |

7. Surface Location

|                      |                     |                        |                     |                         |                          |                          |                         |                      |
|----------------------|---------------------|------------------------|---------------------|-------------------------|--------------------------|--------------------------|-------------------------|----------------------|
| UL - Lot<br><b>0</b> | Section<br><b>7</b> | Township<br><b>25S</b> | Range<br><b>37E</b> | Feet from<br><b>330</b> | N/S Line<br><b>SOUTH</b> | Feet From<br><b>2310</b> | E/W Line<br><b>EAST</b> | County<br><b>Lea</b> |
|----------------------|---------------------|------------------------|---------------------|-------------------------|--------------------------|--------------------------|-------------------------|----------------------|

Well Status

|             |                                                |                               |                                                   |                                 |                           |                          |
|-------------|------------------------------------------------|-------------------------------|---------------------------------------------------|---------------------------------|---------------------------|--------------------------|
| Well Status | <input checked="" type="radio"/> <b>ACTIVE</b> | <input type="radio"/> SHUT-IN | <input checked="" type="radio"/> <b>PRODUCING</b> | <input type="radio"/> INJECTION | <input type="radio"/> SWD | DATE<br><b>8/23/2016</b> |
|-------------|------------------------------------------------|-------------------------------|---------------------------------------------------|---------------------------------|---------------------------|--------------------------|

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

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

|                      | (A)Surf        | (B)Interm(1) | (C)Interm | (D)Prod Csg    | (E)Tubing                               |
|----------------------|----------------|--------------|-----------|----------------|-----------------------------------------|
| Pressure             | <b>0</b>       |              |           | <b>0</b>       | <b>380 psi</b>                          |
| Flow Characteristics |                |              |           |                |                                         |
| Puff                 | Y / <b>(N)</b> | Y / N        | Y / N     | Y / <b>(N)</b> | CO2 <input type="checkbox"/>            |
| Steady Flow          | Y / <b>(N)</b> | Y / N        | Y / N     | Y / <b>(N)</b> | WTR <input checked="" type="checkbox"/> |
| Surges               | Y / <b>(N)</b> | Y / N        | Y / N     | Y / <b>(N)</b> | GAS <input type="checkbox"/>            |
| Down to nothing      | Y / N          | Y / N        | Y / N     | Y / N          | Type of Fluid                           |
| Gas or Oil           | Y / <b>(N)</b> | Y / N        | Y / N     | Y / <b>(N)</b> | Injected for                            |
| Water                | Y / <b>(N)</b> | Y / N        | Y / N     | Y / <b>(N)</b> | Waterflood if applies.                  |

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

|       |       |       |        |       |
|-------|-------|-------|--------|-------|
| CLEAR | FRESH | SALTY | SULFUR | BLACK |
|-------|-------|-------|--------|-------|

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

|                                               |                            |
|-----------------------------------------------|----------------------------|
| Signature: <b>Gary W. Wink</b>                | OIL CONSERVATION DIVISION  |
| Printed name: <b>GARY W. WINK</b>             | Entered into RBDMS         |
| Title: <b>PRODUCTION FOREMAN</b>              | Re-test <b>2/16</b>        |
| E-mail Address: <b>garywink@leaenergy.com</b> |                            |
| Date: <b>8/23/16</b>                          | Phone: <b>575-390-5095</b> |
| Witness:                                      |                            |