

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

HOBBS OCD

SEP 11 2017

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Poso</i>		API Number <i>30-025-11513</i>	
Property Name <i>Langlic Jal</i>		Well No. <i>83</i>	

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>12</i>	<i>9</i>	<i>253</i>	<i>37E</i>	<i>1980</i>	<i>S</i>	<i>660</i>	<i>W</i>	<i>Lea</i>

Well Status

TA'D WELL YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	INJECTOR <i>INJ</i>	SWD	OIL	PRODUCER GAS	DATE <i>8/14/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>φ</i>	<i>—</i>	<i>—</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" 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
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if
					applies

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

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>K. Townsend</i>	Entered into RBDMS
Title: <i>Manager</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>Kyle@PosoResources.com</i>	
Date: <i>8/14/17</i>	
Phone: <i>713-305-9886</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM