

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

BRADENHEAD TEST REPORT

Operator Name RING ENERGY, INC.	API Number 90-025-05904
Property Name WT MANN A	Well No. 002

Surface Location									
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County	
6	36	14-S	37-E	660	N	2310	E	LEA	

Well Status						DATE
TA'D WELL	SHUT-IN	INJECTOR	PRODUCER			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	IN <input checked="" type="checkbox"/>	SWD <input type="checkbox"/>	OIL <input type="checkbox"/>	GAS <input type="checkbox"/>	8-25-21

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	6	0	NA	0	0
Flow Characteristics					VAC
Puff	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	CO2 <input type="checkbox"/>
Steady Flow	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	WTR <input type="checkbox"/>
Surges	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	GAS <input type="checkbox"/>
Down to nothing	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Type of Fluid Injected for Waterflood if applies
Gas or Oil	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	
Water	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	

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

Signature: Wayne Dixon	OIL CONSERVATION DIVISION
Printed name: WAYNE DIXON	Entered into RBDMS
Title: SUPERINTENDENT	Re-test
E-mail Address: WDIXON@RINGENERGY.COM	
Date:	Phone: 432-558-5923
Witness: Kerry Furter - OCD	

263-6633

INSTRUCTIONS ON BACK OF THIS FORM

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

District II
 811 S. First St., Artesia, NM 88210
 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 45527

CONDITIONS

Operator: Ring Energy, Inc P.O. Box 11350 Midland, TX 79702	OGRID: 328599
	Action Number: 45527
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	6/10/2022