

District I  
1623 N French Dr., Hobbs, NM 88240  
Phone (575) 393-6161 Fax: (575) 393-0120

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

**BRADENHEAD TEST REPORT**

|                                                         |  |                                   |
|---------------------------------------------------------|--|-----------------------------------|
| Operator Name<br><b>MORNINGSTAR OPERATING LLC</b>       |  | API Number<br><b>30-025-30843</b> |
| Property Name<br><b>VACUUM GRAYBURG SAN ANDRES UNIT</b> |  | Well No<br><b>142</b>             |

**1. Surface Location**

|                      |                     |                        |                     |                          |                        |                          |                        |                      |
|----------------------|---------------------|------------------------|---------------------|--------------------------|------------------------|--------------------------|------------------------|----------------------|
| UL - Lot<br><b>F</b> | Section<br><b>1</b> | Township<br><b>18S</b> | Range<br><b>34E</b> | Feet from<br><b>1980</b> | N/S Line<br><b>FNL</b> | Feet From<br><b>2628</b> | E/W Line<br><b>FWL</b> | County<br><b>LEA</b> |
|----------------------|---------------------|------------------------|---------------------|--------------------------|------------------------|--------------------------|------------------------|----------------------|

**Well Status**

|                         |           |                       |           |     |          |     |            |          |     |                          |
|-------------------------|-----------|-----------------------|-----------|-----|----------|-----|------------|----------|-----|--------------------------|
| TA'D WELL<br><b>YES</b> | <b>NO</b> | SHUT-IN<br><b>YES</b> | <b>NO</b> | INJ | INJECTOR | SWD | <b>OIL</b> | PRODUCER | GAS | DATE<br><b>3-14-2024</b> |
|-------------------------|-----------|-----------------------|-----------|-----|----------|-----|------------|----------|-----|--------------------------|

**OBSERVED DATA**

|                      | (A) Surface  | (B) Interim (1) | (C) Interim (2) | (D) Prod Casing | (E) Tubing                                                                     |
|----------------------|--------------|-----------------|-----------------|-----------------|--------------------------------------------------------------------------------|
| Pressure             | <b>0</b>     | <b>0</b>        |                 | <b>120</b>      | <b>200</b>                                                                     |
| Flow Characteristics |              |                 |                 |                 |                                                                                |
| Puff                 | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    | CO2<br>WTR<br>GAS<br>Type of Fluid<br>Infected for<br>Waterflood if<br>applies |
| Steady Flow          | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    |                                                                                |
| Surges               | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    |                                                                                |
| Down to nothing      | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    |                                                                                |
| Gas or Oil           | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    |                                                                                |
| Water                | <b>Y / N</b> | <b>Y / N</b>    | <b>Y / N</b>    | <b>Y / N</b>    |                                                                                |

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

|                                                                                                  |                           |                           |  |
|--------------------------------------------------------------------------------------------------|---------------------------|---------------------------|--|
| Signature<br> |                           | OIL CONSERVATION DIVISION |  |
| Printed name: <b>Eloy Carmona</b>                                                                |                           | Entered into RBDMS        |  |
| Title <b>FSA</b>                                                                                 |                           | Re-test                   |  |
| E-mail Address: <b>ECarmona@ctrfieldops.com</b>                                                  |                           |                           |  |
| Date: <b>3-14-2024</b>                                                                           | Phone <b>682-478-6731</b> |                           |  |
| Witness                                                                                          |                           |                           |  |

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 331594

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>MorningStar Operating LLC<br>400 W 7th St<br>Fort Worth, TX 76102 | OGRID:<br>330132                                           |
|                                                                                | Action Number:<br>331594                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| kfortner   | None      | 5/31/2024      |