

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

BRADENHEAD TEST REPORT

Operator Name <i>Smith + Mann</i>	API Number <i>30-025-29818</i>
Property Name <i>Sammel Queen</i>	Well No. <i>8</i>

Surface Location

UL - Lot <i>0</i>	Section <i>1</i>	Township <i>17S</i>	Range <i>33E</i>	Feet from <i>990</i>	N/S Line <i>5</i>	Feet From <i>2310</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	---------------------	------------------------	---------------------	-------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	<i>NO</i>	SHUT-IN YES	<i>NO</i>	INJECTOR <i>INJ</i>	SWB <i>SWB</i>	OIL <i>OIL</i>	PRODUCER GAS	DATE <i>11/24/15</i>
------------------	-----------	----------------	-----------	------------------------	-------------------	-------------------	-----------------	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>8</i>	<i>N/A</i>	<i>N/A</i>	<i>8</i>	<i>240</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>X</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
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>Jason Smith</i>	<i>B8 12/1/15</i>
Printed name: <i>JASON SMITH</i>	OIL CONSERVATION DIVISION
Title:	Entered into RBDMS
E-mail Address:	Re-test
Date: <i>11/24/15</i>	
Phone:	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 02 2015