

HOBBS OCD

APR 21 2016

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

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Breitburn</i>	API Number <i>30-028 38921</i> ✓
Property Name <i>JH Mar</i>	Well No. <i>107</i> ✓

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>B</i>	<i>11</i>	<i>22</i>	<i>35</i>	<i>627</i>	<i>N</i>	<i>2375</i>	<i>E</i>	<i>Lea</i> ✓

Well Status

TA'D WELL	SHUT-IN	INJECTOR	SWD	PRODUCER	GAS	DATE
YES <input checked="" type="checkbox"/> NO	YES <input checked="" type="checkbox"/> NO	INJ <input checked="" type="checkbox"/> SWD		OIL		<i>3/4/16</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	\emptyset	\emptyset	—	\emptyset	<i>750</i>
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 —
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR <input checked="" type="checkbox"/>
Surges	Y/N	Y/N	Y/N	Y/N	GAS —
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Injected for
Water	Y/N	Y/N	Y/N	Y/N	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>Cam Robbins</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cam Robbins</i>	Entered into RBDMS <i>KH</i>
Title: <i>Sr. Field Foreman</i>	Re-test
E-mail Address: <i>CAM.Robbins@Breitburn.com</i>	
Date: <i>3/4/16</i>	Phone: <i>432-425-3001</i>
Witness: <i>[Signature]</i>	

BS 4-27-16