

MAY 12 2016

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

BRADENHEAD TEST REPORT

Operator Name <i>Pyle Well Service, LLC</i>	API Number <i>30-025-02538</i>
Property Name <i>Kaiser SWD</i>	Well No. <i>4009</i>

7. Surface Location

UL- <i>P</i>	Section <i>26</i>	Township <i>19S</i>	Range <i>38E</i>	Feet from <i>1980</i>	N/S Line <i>W</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☐ YES ☐ NO	INJECTOR ☐ INJ ☒ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <i>5/10/2016</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>250</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>CO2</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>WTR</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>GAS</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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>Jerry Buckner</i>	Entered into RBDMS
Title: <i>NM operations Manager, Pyle</i>	Re-test
E-mail Address: <i>jerry@pylewell.com</i>	<i>BAT</i>
Date: <i>5/10/2016</i>	<i>JMB</i>
Phone: <i>432-448-4917</i>	
Witness: <i>Carol Flowers</i>	