

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

MAR 23 2017

BRADENHEAD TEST REPORT

Operator Name <u>Linn Operating</u>		API Number <u>30-025-09142</u>
Property Name <u>SEVEN RIVERS QUEEN UNIT</u>		Well No. <u>35</u>

1. Surface Location									
UL - Lot <u>M</u>	Section <u>34</u>	Township <u>22S</u>	Range <u>36E</u>		Feet from <u>660</u>	N/S Line <u>S</u>	Feet From <u>660</u>	E/W Line <u>W</u>	County <u>Lea</u>

Well Status

TA'D WELL YES ☒	SHUT-IN YES ☒	INJECTOR ☒	SWD	OIL	PRODUCER GAS	DATE <u>3-23-17</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgg	(E)Tubing
Pressure	<u>0</u>	<u>✓</u>	<u>—</u>	<u>0</u>	<u>25</u>
Flow Characteristics					
Puff	Y / ☒	Y / N	Y / N	☒ / N	CO2 <u>—</u>
Steady Flow	Y / ☒	Y / N	Y / N	Y / ☒	WTR <u>✓</u>
Surges	Y / ☒	Y / N	Y / N	Y / ☒	GAS <u>—</u>
Down to nothing	☒ / N	Y / N	Y / N	☒ / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / ☒	Y / N	Y / N	Y / ☒	
Water	Y / ☒	Y / N	Y / N	Y / ☒	

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

Signature: <u>[Signature]</u>		OIL CONSERVATION DIVISION	
Printed name: <u>Paul Cowan</u>		Entered into RBDMS	
Title:		Re-test <u>XZ</u>	
E-mail Address: <u>pcowan@linn.energy.com</u>			
Date: <u>3-23-17</u>	Phone: <u>575-631-4007</u>		
Witness: <u>Kerry Koroma-OCD</u> <u>395-3221</u>			

INSTRUCTIONS ON BACK OF THIS FORM