

AUG 10 2017

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Rice Operating</i>						API Number <i>30-025-24399</i> ✓			
Property Name <i>Blinebry Drinkard</i>						Well No. <i>#2</i> ✓			
7. Surface Location									
UL - Lot <i>C</i>	Section <i>2</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>2305</i>	E/W Line <i>W</i>	County <i>LEA</i>	
Well Status									
TA'D WELL YES ☒ NO		SHUT-IN YES ☒ NO		INJ ☒ INJECTOR ☒ SWD		OIL PRODUCER GAS		DATE <i>8-8-17</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>VAC</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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>Isabel Juarez</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Isabel Juarez</i>		Entered into RBDMS	
Title: <i>Foreman</i>		Re-test <i>[Signature]</i>	
E-mail Address: <i>ijuarez@rice.swd.com</i>			
Date: <i>8-9-17</i>	Phone:		
Witness: <i>Gary Holmson</i>			

399-3220

INSTRUCTIONS ON BACK OF THIS FORM