

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name <i>Morning Star Operating LLC</i>		API Number <i>30-025-32016</i>
Property Name <i>New Mexico M State</i>		Well No. <i># 009</i>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>6</i>	<i>1</i>	<i>185</i>	<i>34E</i>	<i>460</i>	<i>N</i>	<i>2310</i>	<i>W</i>	LEA

Well Status

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input type="checkbox"/> SWD <input type="checkbox"/>	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	<i>7-5-2023</i>

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>0</i>	 	 	<i>40</i>	<i>200</i>
Flow Characteristics					
Puff	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	CO2 _____
Steady Flow	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	WTR _____
Surges	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	GAS _____
Down to nothing	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	If applicable type
Gas or Oil	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	fluid injected for
Water	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input checked="" type="checkbox"/>	Y / N <input type="checkbox"/>	Waterflood

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 <i>[Signature]</i>
Printed name: <i>Eloy Carranza</i>	
Title: <i>FSA</i>	
E-mail Address: <i>emiller@ctfieldsvcs.com</i>	
Date: <i>7-5-2023</i>	
Phone: <i>482-478-6731</i>	
Witness:	

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720

District II
 811 S. First St., Artesia, NM 88210
 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 250254

CONDITIONS

Operator: MorningStar Operating LLC 400 W 7th St Fort Worth, TX 76102	OGRID: 330132
	Action Number: 250254
	Action Type: [UF-BHT] Bradenhead Test (BRADENHEAD TEST)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	8/11/2023