

AUG 21 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Breck</i>		API Number <i>30-025-37387</i>
Property Name <i>Santa Rita</i>		Well No. <i>3</i>

7. Surface Location

UL - Lot <i>N</i>	Section <i>22</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>790</i>	N/S Line <i>S</i>	Feet From <i>1650</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES <input checked="" type="checkbox"/> NO	SHUT-IN YES <input checked="" type="checkbox"/> NO	INJECTOR INJ <input type="checkbox"/> SWD <input type="checkbox"/>	PRODUCER <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	DATE <i>8/20/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>N/A</i>	<i>N/A</i>	<i>25</i>	<i>30</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
Down to nothing	<i>Ø 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>Kevin Breckel</i>	<i>BS 8/29/2015</i>
Printed name: Kevin Breckel	OIL CONSERVATION DIVISION
Title: Production Superintendent	Entered into RBDMS
E-mail Address: kbreckel@breckop.com / mesquite@valornet.com	Re-test
Date: <i>8/20/15</i>	
Phone: (254) 559-0881	
Witness: <i>James Bow</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015