

MAY 04 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>McGowan Working Partners Inc.</i>	API Number <i>3002520228(0000)</i>
Property Name <i>STATE H 35</i>	Well No. <i>009</i>

Surface Location

UL	Dpt	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
	<i>H</i>	<i>35</i>	<i>175</i>	<i>34E</i>	<i>1980</i>	<i>N</i>	<i>460</i>	<i>E</i>	<i>LeA</i>

Well Status

<input checked="" type="radio"/> YES	KA'D WELL	NO	<input checked="" type="radio"/> YES	SHUT-IN	NO	INJ	INJECTOR	SWD	<input checked="" type="radio"/> OIL	PRODUCER	GAS	DATE
												<i>3/22/16</i>

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	ϕ	ϕ		ϕ	ϕ
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.

BS 5.13.16

Signature: <i>Jack Stevenson</i>	OIL CONSERVATION DIVISION
Printed name: <i>JACK STEVENSON</i>	Entered into RBDMS <i>OB</i>
Title:	Re-test
E-mail Address:	
Date: <i>3/22/16</i>	Phone: <i>575-631-1083</i>
Witness: <i>[Signature]</i>	

[Red Stamp]