

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

BRADENHEAD TEST REPORT

HOBBS OCO
 AUG 27 2008
 RECEIVED

Operator Name <i>McDonald Operating</i>	API Number <i>30-025-11154</i>
Property Name <i>Langlie Jack</i>	Well No. <i>#12</i>

Surface Location									
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County	
<i>I</i>	<i>20</i>	<i>24S</i>	<i>37E</i>	<i>1980</i>	<i>S</i>	<i>660</i>	<i>E</i>	<i>LEA</i>	

Well Status									
TA'D WELL	NO	SHUT-IN	NO	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					<i>8-1-18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>d-gms</i>
Flow Characteristics					
Pull	<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:	OIL CONSERVATION DIVISION Entered into RBDMS Re-test <i>[Signature]</i>
Printed name:	
Title:	
E-mail Address:	
Date:	
Phone:	
Witness: <i>Greg Robinson</i>	