

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

HOBBS OCD

JUL 30 2020

BRADENHEAD TEST REPORT

Operator Name RING ENERGY, INC		30-025-07506 RECEIVED	
Property Name FM Holloway			Well No. 001

Surface Location									
UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
B	13	17S	38-E		660	N	1980	E	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 checked="" type="checkbox"/>	OIL <input type="checkbox"/> GAS <input type="checkbox"/>	7/28/2020

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1500
Flow Characteristics					
Puff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CO2 <input type="checkbox"/>
Steady Flow	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WTR <input checked="" type="checkbox"/>
Surges	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	GAS <input type="checkbox"/>
Down to nothing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type of fluid injected for Water/Berd if applies
Gas or Oil	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Water	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.
ANNUAL VIC

Signature: Wayne Dixon	OIL CONSERVATION DIVISION	
Printed name: WAYNE DIXON	Entered into RBDMS	
Title: SUPERINTENDENT	Re-test X 7	
E-mail Address: WDIXON@RINGENERGY.COM		
Date: 7/28/2020	Phone: 432-556-5925	
Witness: [Signature]		

INSTRUCTIONS ON BACK OF THIS FORM