

District 1  
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<br><b>LEGACY RESERVES OPERATING LP</b>     |  | API Number<br><b>30-025-10556</b> |
| Property Name<br><b>LANGLIE MATTIX PENROSE SAND UNIT</b> |  | Well No.<br><b>351</b>            |

2. Surface Location

|                      |                      |                        |                     |  |                         |                      |                         |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><b>A</b> | Section<br><b>33</b> | Township<br><b>22S</b> | Range<br><b>37E</b> |  | Feet from<br><b>330</b> | N/S Line<br><b>N</b> | Feet From<br><b>330</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|----------------------|----------------------|------------------------|---------------------|--|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                                                      |                                                    |                                                                     |                                                                            |                         |
|------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------|
| TA'D WELL<br>YES <input checked="" type="radio"/> NO | SHUT-IN<br>YES <input checked="" type="radio"/> NO | INJ INJECTOR<br>INJ <input type="radio"/> SWD <input type="radio"/> | PRODUCER<br><input checked="" type="radio"/> OIL <input type="radio"/> GAS | DATE<br><b>12/14/20</b> |
|------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------|

OBSERVED DATA

|                      | (A)Surface                                                 | (B)Interm(1)                                               | (C)Interm(2)                                               | (D)Prod Csg                                                | (E)Tubing                    |
|----------------------|------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------|------------------------------|
| Pressure             | <b>Ø</b>                                                   | <b>NA</b>                                                  | <b>NA</b>                                                  | <b>40</b>                                                  | <b>55</b>                    |
| Flow Characteristics |                                                            |                                                            |                                                            |                                                            |                              |
| Puff                 | <input checked="" type="radio"/> Y <input type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | CO2 <input type="checkbox"/> |
| Steady Flow          | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | WTR <input type="checkbox"/> |
| Surges               | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | GAS <input type="checkbox"/> |
| Down to nothing      | <input checked="" type="radio"/> Y <input type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | Type of Fluid                |
| Gas or Oil           | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | Injected for                 |
| Water                | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | <input type="radio"/> Y <input checked="" type="radio"/> N | 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 |  |
| Printed name: <b>DUSTY WOODRICK</b> |        | Entered into RBDMS        |  |
| Title: <b>PRODUCTION TECH</b>       |        | Re-test                   |  |
| E-mail Address:                     |        | <b>K F</b>                |  |
| Date: <b>12/14/20</b>               | Phone: |                           |  |
| 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 16359

**CONDITIONS OF APPROVAL**

|              |                               |                  |        |        |                |       |              |                 |
|--------------|-------------------------------|------------------|--------|--------|----------------|-------|--------------|-----------------|
| Operator:    | LEGACY RESERVES OPERATING, LP | 15 Smith Road    | OGRID: | 240974 | Action Number: | 16359 | Action Type: | BRADENHEAD TEST |
|              | Suite 3000                    | Midland, TX79705 |        |        |                |       |              |                 |
| OCD Reviewer | Condition                     |                  |        |        |                |       |              |                 |
| kfortner     | None                          |                  |        |        |                |       |              |                 |