

District I  
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>MORINGSTAR OPERATING LLC | API Number<br>30-025- 62324 |
| Property Name<br>CENTRAL VACUUM UNIT      | Well No.<br>Cv4 126         |

## 1. Surface Location

|               |               |                 |              |                  |               |                  |               |               |
|---------------|---------------|-----------------|--------------|------------------|---------------|------------------|---------------|---------------|
| UL - Lot<br>A | Section<br>12 | Township<br>18S | Range<br>34E | Feet from<br>330 | N/S Line<br>N | Feet From<br>990 | E/W Line<br>E | County<br>LEA |
|---------------|---------------|-----------------|--------------|------------------|---------------|------------------|---------------|---------------|

## Well Status

|                                                   |    |                                                 |    |     |                 |                                                  |     |                  |
|---------------------------------------------------|----|-------------------------------------------------|----|-----|-----------------|--------------------------------------------------|-----|------------------|
| TA'D WELL<br><input checked="" type="radio"/> YES | NO | SHUT-IN<br><input checked="" type="radio"/> YES | NO | INJ | INJECTOR<br>SWD | PRODUCER<br><input checked="" type="radio"/> OIL | GAS | DATE<br>10-26-23 |
|---------------------------------------------------|----|-------------------------------------------------|----|-----|-----------------|--------------------------------------------------|-----|------------------|

## OBSERVED DATA

|                      | (A)Surface                             | (B)Interm(1) | (C)Interm(2) | (D)Prod Casing                         | (E)Tubing     |
|----------------------|----------------------------------------|--------------|--------------|----------------------------------------|---------------|
| Pressure             | 0                                      | N/A          | N/A          | 0                                      | None          |
| Flow Characteristics |                                        |              |              |                                        |               |
| Puff                 | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | CO2           |
| Steady Flow          | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | WTR           |
| Surges               | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | GAS           |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N        | Y / N        | <input checked="" type="radio"/> Y / N | Type of Fluid |
| Gas or Oil           | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | Y / <input checked="" type="radio"/> N | Injected for  |
| Water                | Y / <input checked="" type="radio"/> N | Y / N        | Y / N        | 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: RUDY GONZALES                                                                    | Entered into RBDMS        |
| Title: LEASE OPERATOR                                                                          | Re-test                   |
| E-mail Address: RGONZALES@CTFIELDVCS.COM                                                       |                           |
| Date: 10-26-2023                                                                               |                           |
| Phone: 682-352-1518                                                                            |                           |
| Witness:                                                                                       |                           |

INSTRUCTIONS ON BACK OF THIS FORM

**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 305749

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>MorningStar Operating LLC<br>400 W 7th St<br>Fort Worth, TX 76102 | OGRID:<br>330132                                           |
|                                                                                | Action Number:<br>305749                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| kfortner   | None      | 1/25/2024      |