

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><b>MORNING STAR PARTNERS</b> | API Number<br>30-025- <b>33722</b> |
| Property Name<br><b>CENTRAL VACUUM UNIT</b>   | Well No.<br><b>CUU - 175</b>       |

## 7. Surface Location

|                      |                      |                        |                     |                          |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><b>L</b> | Section<br><b>31</b> | Township<br><b>17S</b> | Range<br><b>3SE</b> | Feet from<br><b>1617</b> | N/S Line<br><b>S</b> | Feet From<br><b>1107</b> | E/W Line<br><b>W</b> | County<br><b>LEA</b> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|

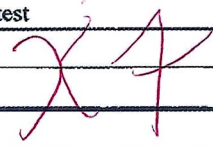
## Well Status

|                         |           |                       |           |     |                        |                        |            |                        |
|-------------------------|-----------|-----------------------|-----------|-----|------------------------|------------------------|------------|------------------------|
| TA'D WELL<br><b>YES</b> | <b>NO</b> | SHUT-IN<br><b>YES</b> | <b>NO</b> | INJ | INJECTOR<br><b>SWD</b> | PRODUCER<br><b>OIL</b> | <b>GAS</b> | DATE<br><b>7-21-22</b> |
|-------------------------|-----------|-----------------------|-----------|-----|------------------------|------------------------|------------|------------------------|

## OBSERVED DATA

|                             | (A)Surface   | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg    | (E)Tubing                    |
|-----------------------------|--------------|--------------|--------------|----------------|------------------------------|
| Pressure                    | <b>0</b>     | <b>NA</b>    | <b>NA</b>    | <b>400 psi</b> | <b>280 psi</b>               |
| <b>Flow Characteristics</b> |              |              |              |                |                              |
| Puff                        | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | CO2 <input type="checkbox"/> |
| Steady Flow                 | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | WTR <input type="checkbox"/> |
| Surges                      | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | GAS <input type="checkbox"/> |
| Down to nothing             | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | Type of Fluid                |
| Gas or Oil                  | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | Injected for                 |
| Water                       | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b>   | 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>RAUL GONZALES</b>                                                             | Entered into RBDMS                                                                    |
| Title: <b>LEASE OPERATOR</b>                                                                   | Re-test                                                                               |
| E-mail Address: <b>RGONZALES@CTFIELDVCS.COM</b>                                                |  |
| Date: <b>7-21-22</b>                                                                           |                                                                                       |
| Phone: <b>682-352-1518</b>                                                                     |                                                                                       |
| 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 158786

CONDITIONS

|                                                                                |                                                            |
|--------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>MorningStar Operating LLC<br>400 W 7th St<br>Fort Worth, TX 76102 | OGRID:<br>330132                                           |
|                                                                                | Action Number:<br>158786                                   |
|                                                                                | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|                |           |                |
|----------------|-----------|----------------|
| Created By     | Condition | Condition Date |
| timothy.martin | None      | 9/10/2024      |