

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

## BRADENHEAD TEST REPORT

|                                            |                                   |
|--------------------------------------------|-----------------------------------|
| Operator Name<br><i>Maverick Resources</i> | API Number<br><i>30-025-00685</i> |
| Property Name<br><i>MCA Unit</i>           | Well No.<br><i>137</i>            |

## Surface Location

|                     |                      |                        |                     |                          |                     |                         |                      |                     |
|---------------------|----------------------|------------------------|---------------------|--------------------------|---------------------|-------------------------|----------------------|---------------------|
| UL, Lot<br><i>H</i> | Section<br><i>25</i> | Township<br><i>17N</i> | Range<br><i>32E</i> | Feet from<br><i>1980</i> | NS Line<br><i>5</i> | Feet from<br><i>660</i> | E/W Line<br><i>E</i> | County<br><i>La</i> |
|---------------------|----------------------|------------------------|---------------------|--------------------------|---------------------|-------------------------|----------------------|---------------------|

## Well Status

|                                                                                  |                                                                               |                                                 |                                 |                                 |                                      |                                 |                         |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------|---------------------------------|--------------------------------------|---------------------------------|-------------------------|
| TA'D WELL<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | SIG-IN<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | INJECTOR<br><input checked="" type="checkbox"/> | SWD<br><input type="checkbox"/> | OIL<br><input type="checkbox"/> | PRODUCER<br><input type="checkbox"/> | GAS<br><input type="checkbox"/> | DATE<br><i>6-4-2024</i> |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------|---------------------------------|--------------------------------------|---------------------------------|-------------------------|

## OBSERVED DATA

|                      | (A) Surface | (B) Intermt 1 | (C) Intermt 2 | (D) Prod Casing | (E) Tubing                                       |
|----------------------|-------------|---------------|---------------|-----------------|--------------------------------------------------|
| Pressure             | 0           | 0             | 0             | 0               | 1550                                             |
| Flow Characteristics |             |               |               |                 |                                                  |
| Puff                 | Y/N         | Y/N           | Y/N           | Y/N             | CO2 <input checked="" type="checkbox"/>          |
| Steady Flow          | Y/N         | Y/N           | Y/N           | Y/N             | WTR <input checked="" type="checkbox"/>          |
| Surges               | Y/N         | Y/N           | Y/N           | Y/N             | GAS <input type="checkbox"/>                     |
| Down to nothing      | Y/N         | Y/N           | Y/N           | Y/N             | Type of Fluid Inferred for Waterflood if applies |
| Gas or Oil           | Y/N         | Y/N           | Y/N           | Y/N             |                                                  |
| Water                | Y/N         | Y/N           | Y/N           | Y/N             |                                                  |

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

A passed  
B passed  
C passed  
D passed

|                                                              |                           |
|--------------------------------------------------------------|---------------------------|
| Signature: <i>Bridie Bratcher</i>                            | OIL CONSERVATION DIVISION |
| Printed name: <i>Bridie Bratcher</i>                         | Entered into RBDMS        |
| Title: <i>Lead</i>                                           | Re-test                   |
| E-mail Address: <i>bridie.bratcher@maverickresources.com</i> |                           |
| Date: <i>6-4-2024</i>                                        |                           |
| Phone: <i>505-200-2961</i>                                   |                           |
| Witness:                                                     |                           |

INSTRUCTIONS ON BACK OF THIS FORM

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/oed/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 363199

CONDITIONS

|                                                                                        |                                                            |
|----------------------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>Maverick Permian LLC<br>1000 Main Street, Suite 2900<br>Houston, TX 77002 | OGRID:<br>331199                                           |
|                                                                                        | Action Number:<br>363199                                   |
|                                                                                        | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

|            |           |                |
|------------|-----------|----------------|
| Created By | Condition | Condition Date |
| kfortner   | None      | 12/2/2024      |