

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>ARMSTRONG ENERGY CORP</b> |  | API Number<br><b>30-025-33883</b> |
| Property Name<br><b>BIG BERTHA</b>            |  | Well No.<br><b>1</b>              |

## 7. Surface Location

|                      |                      |                        |                     |                          |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><b>E</b> | Section<br><b>11</b> | Township<br><b>16S</b> | Range<br><b>36E</b> | Feet from<br><b>2081</b> | N/S Line<br><b>N</b> | Feet From<br><b>1870</b> | E/W Line<br><b>W</b> | County<br><b>LEA</b> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|

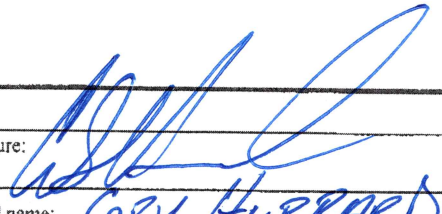
## Well Status

|                                                                                  |                                                                                |                                                                                  |                                                                       |                        |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------|
| TA'D WELL<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | SHUT-IN<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | INJECTOR<br>INJ <input type="checkbox"/> SWD <input checked="" type="checkbox"/> | PRODUCER<br>OIL <input type="checkbox"/> GAS <input type="checkbox"/> | DATE<br><b>9/12/24</b> |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                   |
|----------------------|------------|--------------|--------------|-------------|-----------------------------|
| Pressure             | <b>0</b>   | <b>0</b>     | <b>NA</b>    | <b>0</b>    | <b>0</b>                    |
| Flow Characteristics |            |              |              |             |                             |
| Puff                 | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | CO2 _____                   |
| Steady Flow          | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | WTR _____                   |
| Surges               | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | GAS _____                   |
| 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>CORY HUBBARD</b>                                                              |                              | Entered into RBDMS        |  |
| Title: <b>FOREMAN</b>                                                                          |                              | Re-test <b>GR</b>         |  |
| E-mail Address: <b>CHUBBARD@HECNM.COM</b>                                                      |                              |                           |  |
| Date: <b>9/12/24</b>                                                                           | Phone: <b>(575) 626-7142</b> |                           |  |
| 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/ocd/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 388553

CONDITIONS

|                                                                          |                                                            |
|--------------------------------------------------------------------------|------------------------------------------------------------|
| Operator:<br>ARMSTRONG ENERGY CORP<br>P.O. Box 1973<br>Roswell, NM 88202 | OGRID:<br>1092                                             |
|                                                                          | Action Number:<br>388553                                   |
|                                                                          | Action Type:<br>[UF-BHT] Bradenhead Test (BRADENHEAD TEST) |

CONDITIONS

| Created By | Condition | Condition Date |
|------------|-----------|----------------|
| kfortner   | None      | 12/10/2024     |