

AUG 29 2014

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Buckeye Disposal LLC</i>		API Number <i>E 7723</i>	
Property Name <i>STATE AF #3</i>		Well No. <i>3</i>	

7. Surface Location

UL - Lot <i>L</i>	Section <i>8</i>	Township <i>18S</i>	Range <i>35E</i>	Feet from <i>1980</i>	N Line <i>South</i>	Feet From <i>990</i>	E/W Line <i>West</i>	County <i>Lea</i>
----------------------	---------------------	------------------------	---------------------	--------------------------	------------------------	-------------------------	-------------------------	----------------------

Well Status

YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJ	INJECTOR <i>SWD</i>	OIL	PRODUCER	GAS	DATE <i>8-27-14</i>
-----	------------------------	-----	----------------------	-----	------------------------	-----	----------	-----	------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>-20</i>
Flow Characteristics					
Puff	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 ____
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR ____
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS ____
Down to nothing	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Type of Fluid
Gas or Oil	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Injected for
Water	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	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.

ALL tested OK

FOR RECORD ONLY

SAS/OCD

COMPLIANCE OFFICER

Signature: <i>Jim Sayre</i>		OIL CONSERVATION DIVISION	
Printed name: <i>JIM SAYRE</i>		Entered into RBDMS	
Title: <i>MANAGER</i>		Re-test	
E-mail Address: <i>jim@the standard energy.com</i>			
Date: <i>8-27-14</i>	Phone: <i>575-390-6006</i>		
Witness:			

h