

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

SEP 24 2014

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>North Star Oper.</i>		API Number <i>30-025-26443</i>
Property Name <i>T.P. STATE</i>		Well No. <i>1</i>

Surface Location

UL - Lot	Section <i>8</i>	Township <i>35E</i>	Range <i>18S</i>	Feet from	N/S Line	Feet From	E/W Line	County <i>LEA</i>
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Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input type="radio"/> NO <input checked="" type="radio"/>	INJECTOR INJ <input type="radio"/> SWD <input checked="" type="radio"/>	PRODUCER GAS <input type="radio"/> OIL <input checked="" type="radio"/>	DATE <i>9/4/2014</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>		<i>30</i>	<i>30</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.

FOR RECORD ONLY

PS 9/26/2014

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Kenny Bradford</i>	Entered into RBDMS
Title: <i>Production Superintendent</i>	Re-test
E-mail Address: <i>kbradford@northstarop.com</i>	
Date: <i>9/4/2014</i>	Phone: <i>432/684-5765</i>
Witness: <i>[Signature]</i>	

h.