

OCT 08 2014

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

RECEIVED

BRADENHEAD TEST REPORT

|                                                 |  |                                  |  |
|-------------------------------------------------|--|----------------------------------|--|
| Operator Name<br><b>ENDURANCE RESOURCES LLC</b> |  | API Number<br><b>30-02524676</b> |  |
| Property Name<br><b>FEDERAL 19</b>              |  | Well No.<br><b>1</b>             |  |

Surface Location

|                    |                      |                       |                    |                         |                     |                         |                      |                      |
|--------------------|----------------------|-----------------------|--------------------|-------------------------|---------------------|-------------------------|----------------------|----------------------|
| UL Lot<br><b>A</b> | Section<br><b>19</b> | Township<br><b>23</b> | Range<br><b>34</b> | Feet from<br><b>660</b> | NS Line<br><b>N</b> | Feet From<br><b>660</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|--------------------|----------------------|-----------------------|--------------------|-------------------------|---------------------|-------------------------|----------------------|----------------------|

Well Status

|                         |                      |                  |                        |                        |                   |                        |
|-------------------------|----------------------|------------------|------------------------|------------------------|-------------------|------------------------|
| TA'D WELL<br><b>YES</b> | SHUT-IN<br><b>NO</b> | INJ<br><b>NO</b> | INJECTOR<br><b>SWD</b> | PRODUCER<br><b>OIL</b> | GAS<br><b>GAS</b> | DATE<br><b>9-30-14</b> |
|-------------------------|----------------------|------------------|------------------------|------------------------|-------------------|------------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                                                 |
|----------------------|------------|--------------|--------------|-------------|-----------------------------------------------------------|
| Pressure             | <b>0</b>   | <b>—</b>     | <b>—</b>     | <b>0</b>    | <b>1000</b>                                               |
| Flow Characteristics |            |              |              |             |                                                           |
| Puff                 | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | CO2 <b>—</b>                                              |
| Steady Flow          | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | WTR <b>—</b>                                              |
| Surges               | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | GAS <b>—</b>                                              |
| Down to nothing      | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  | Type of Fluid<br>Injected for<br>Waterflood if<br>applies |
| Gas or Oil           | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  |                                                           |
| Water                | <b>Y/N</b> | <b>Y/N</b>   | <b>Y/N</b>   | <b>Y/N</b>  |                                                           |

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

Test witnessed by George Bower w/OCD - Hobbs.

FOR RECORD ONLY

BL 10/8/2014

|                                     |                            |                           |  |
|-------------------------------------|----------------------------|---------------------------|--|
| Signature: <b>Glenn Roberson</b>    |                            | OIL CONSERVATION DIVISION |  |
| Printed name: <b>GLENN ROBERSON</b> |                            | Entered into RBDMS        |  |
| Title: <b>PROD. SUPT.</b>           |                            | Re-test                   |  |
| E-mail Address:                     |                            |                           |  |
| Date: <b>9-30-14</b>                | Phone: <b>575-703-5525</b> |                           |  |
| Witness: <b>[Signature]</b>         |                            |                           |  |

**[Signature]**