

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

BRADENHEAD TEST REPORT

Operator Name <i>Momentum Operating</i>					API Number <i>30-025-27635</i>				
Property Name <i>Teas Yates Unit</i>					Well No. <i>103</i>				
Surface Location									
UL - Lot	Section <i>14</i>	Township <i>20S</i>	Range <i>33E</i>	<i>-</i>	Feet from	N/S Line	Feet from	E/W Line	County <i>LCA</i>

Well Status									
TA'D WELL YES	<i>NO</i>	YES	SHUT-IN <i>NO</i>	<i>NO</i>	INJECTOR <i>NO</i>	SWD	OIL	PRODUCER GAS	DATE <i>11/4/2014</i>

OBSERVED DATA

	(A) Surface	(B) Interval 1	(C) Interval 2	(D) Production	(E) Tubing
Pressure	<i>0</i>			<i>0</i>	<i>1400</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 ☐
Burges	<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

BS 11/4/2014

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RDBMS	
Title:		Re-test	
E-mail Address:			
Date: <i>11/4/2014</i>	Phone:		
Witness: <i>[Signature]</i>			

NOV 05 2014