<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

State of New Mexico

NOV 1 9 2014

Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

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| | | | | | <u>ADENH</u> | <u>EAD TE</u> | CST RE | CPORT | ľ | | | | | |
|------------------------------------------------------|----------------------|-----------------|----------------|----------|-------------------|------------------|--------|-------------------|----------|---------------------------------------|------------------|----------------------------|--------|--|
| Operator Name | | | | | | | | | | · API Number | | | | |
| Burgundy Oil & Gas of New Mexico, Inc. Property Name | | | | | | | | | | 30-025-06079 Well No. | | | | |
| | Skaggs Grayburg Unit | | | | | | | | | | 5 | | | |
| | | | | | | face Loca | tion | | • | | <u> </u> | | | |
| UL – Lot M | 1 12 220 ' | | Range 37E | | | Feet from 660 | | N/S Line South | | rom | E/W Line West | Coun Lea | • | |
| ! | | | | | W | ell Statu | s | - | <u> </u> | • • • • • • • • • • • • • • • • • • • | | • | | |
| YES TA'D WELL NO | | YES | SHUT-IN YES | | NO (INJ) INJECTOR | | SWD | SWD OIL PRODUCE | | GAS | | DATE 10/06/2014 | | |
| | | | | | <u>OBSEI</u> | RVED D | ATA | | | | | | | |
| | | (A)Surf | (A)Surface | | (B)Interm(1) | | | (C)Interm(2) | | (D)Prod Csng | | (E)Tubing | | |
| Pressure | | 6 | a | | | | | | | 0 | | 0 | \Box | |
| Flow Charac | teristics | 1 - | | | | | | | | <u> </u> | | | | |
| Puff | | (\ | (Y)N | | Y / N | | Y/N | | | Y / N | | CO2 | | |
| Steady Flow | | 1 | Y/N | | Y / N | | Y / N | | Y / N | | WTR | | | |
| Surges | | | Y / N | | Y / N | | Y/N | | Y / N | | GAS | ł | | |
| Down to nothing | | 1 | Y / N | | Y/N | | | Y/N | | Y/N | | Injected for Waterflood if | | |
| Gas or Oil | | , | Y/N | | Y / N | | Y/N | | Y / N | | applies. | | | |
| Water | | , | Y/N | | Y / N | | Y/N | | Y/N | | | | | |
| Remarks – Ple | ase state for ea | ch string (A | ,B,C,D,E) pert | inent in | | garding blee | | | | if applies. | | | | |
| | ***** | | | | / | BS . | 11/20 | 120 | 14 | | | | | |
| Signature: | | | 6000 | 7 | | | | | OII | CONS | ERVATIO | N DIVISIO | N | |

Entered into RBDMS Printed name: Cindy Campbell Re-test Title: Production Accountant E-mail Address: ccampbell.bogi@att.net Date: 11/18/14 Phone: 432-684-4033, x-205 Witness: George Bowen

NOV 2 5 2014