

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

HOBBSOCD

FEB 13 2015

BRADENHEAD TEST REPORT

Operator Name <i>Linn Operating</i>	API Number <i>30-025-01453</i> ✓
Property Name <i>Caprock Maljamar Unit</i>	Well No. <i>21</i> ✓

2. Surface Location

UL - Lot <i>J</i>	Section <i>17</i>	Township <i>17S</i>	Range <i>33E</i>	Feet from <i>1650</i>	N/S Line <i>FSL</i>	Feet From <i>1980</i>	E/W Line <i>FEL</i>	County <i>Lea</i> ✓
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <i>INJ</i>	SWD	PRODUCER OIL	GAS	DATE <i>1/27/15</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>N/A</i>	<i>N/A</i>	<i>0</i>	<i>2200</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.

A#0 - had nothing

BS 2/18/2014

Signature: <i>D. Sooter</i>	OIL CONSERVATION DIVISION
Printed name: <i>Darren Sooter</i>	Entered into RBDMS
Title: <i>Production Specialist</i>	Re-test
E-mail Address: <i>dsooter@linnenergy.com</i>	
Date: <i>1/27/15</i>	Phone: <i>575-369-9113</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

FEB 20 2015