

MAR 23 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Linn Operating</i>		API Number <i>30-025-32260</i>	
Property Name <i>St-36</i>		Well No. <i>4</i>	

7. Surface Location

UL - Lot <i>K</i>	Section <i>36</i>	Township <i>17S</i>	Range <i>33E</i>	Feet from <i>2310</i>	N/S Line <i>FSL</i>	Feet From <i>1980</i>	E/W Line <i>FWL</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJ	INJECTOR SWD	PRODUCER ☒ OIL GAS	DATE <i>3/6/15</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>5</i>	<i>100</i>
Flow Characteristics					
Pull	<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 - Nothing

D - gas, Down to Nothing

BS 3/31/2015

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@linenergy.com</i>	
Date: <i>3/6/15</i>	
Phone: <i>575-364-9113</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

APR 02 2015