

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

APR 09 2015

BRADENHEAD TEST REPORT

|                                         |                                   |
|-----------------------------------------|-----------------------------------|
| Operator Name<br><i>Chenon USA Inc</i>  | API Number<br><i>30-025-31888</i> |
| Property Name<br><i>Vacuum Blonista</i> | Well No.<br><i>105</i>            |

Surface Location

|                      |                      |                        |                     |                         |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><i>N</i> | Section<br><i>36</i> | Township<br><i>17S</i> | Range<br><i>34E</i> | Feet from<br><i>453</i> | N/S Line<br><i>S</i> | Feet From<br><i>1340</i> | E/W Line<br><i>W</i> | County<br><i>Lea</i> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|

Well Status

|     |                                                  |     |                                                |                                                  |     |          |     |                       |
|-----|--------------------------------------------------|-----|------------------------------------------------|--------------------------------------------------|-----|----------|-----|-----------------------|
| YES | TA'D WELL<br><input checked="" type="radio"/> NO | YES | SHUT-IN<br><input checked="" type="radio"/> NO | INJECTOR<br><input checked="" type="radio"/> SWD | OIL | PRODUCER | GAS | DATE<br><i>4/9/15</i> |
|-----|--------------------------------------------------|-----|------------------------------------------------|--------------------------------------------------|-----|----------|-----|-----------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                                                  |
|----------------------|------------|--------------|--------------|-------------|------------------------------------------------------------|
| Pressure             | <i>φ</i>   | <i>N/A</i>   | <i>N/A</i>   | <i>φ</i>    | <i>750</i>                                                 |
| Flow Characteristics |            |              |              |             |                                                            |
| Puff                 | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | CO2 <i>—</i>                                               |
| Steady Flow          | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | WTR <i>X</i>                                               |
| Surges               | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | GAS <i>—</i>                                               |
| Down to nothing      | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | Type of Fluid<br>Injected for<br>Waterflood if<br>applies. |
| Gas or Oil           | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  |                                                            |
| Water                | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  |                                                            |

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

*BS 4/10/2015*

|                                 |                           |
|---------------------------------|---------------------------|
| Signature: <i>Tom Chenon</i>    | OIL CONSERVATION DIVISION |
| Printed name: <i>Tom Chenon</i> | Entered into RBDMS        |
| Title:                          | Re-test                   |
| E-mail Address:                 |                           |
| Date: <i>4/9/15</i>             | Phone:                    |
| Witness: <i>John Dow</i>        |                           |

INSTRUCTIONS ON BACK OF THIS FORM

APR 14 2015