

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

MAY 26 2015

BRADENHEAD TEST REPORT

Operator Name <i>RESOLUTE NATURAL RESOURCES CO, LLC</i>	API Number <i>30-025-07303</i>
Property Name <i>JG COX SWD</i>	Well No. <i>07303</i>

1. Surface Location

UL - Lot <i>C</i>	Section <i>13</i>	Township <i>17S</i>	Range <i>38E</i>	Feet from <i>600</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJ INJ ☐ <i>(SWD)</i>	PRODUCER OIL ☐ GAS ☐	DATE <i>5-21-15</i>
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OBSERVED DATA

	(A) Surface	(B) Interim (1)	(C) Interim (2)	(D) Prod Casing	(E) Tubing
Pressure				<i>0</i>	<i>600</i>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	<i>Y / N</i>	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ☒
Surges	Y / N	Y / N	Y / N	Y / N	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

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

UIC TESTING 2015

FOR RECORD ONLY

BS 5/26/2015

Signature: <i>Wayne Dixon</i>	OIL CONSERVATION DIVISION
Printed name: <i>WAYNE DIXON</i>	Entered into RBDMS
Title: <i>PRODUCTION TECH.</i>	Re-test
E-mail Address:	
Date: <i>5-21-15</i>	Phone:
	Witness:

INSTRUCTIONS ON BACK OF THIS FORM

MAY 27 2015

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