

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

MAY 26 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>RESOLUTE NATURAL RESOURCES, L.L.C.</i>	API Number <i>30-025-73060</i>
Property Name <i>FM Holloway</i>	Well No. <i>1</i>

Surface Location

UL - Lot <i>B</i>	Section <i>13</i>	Township <i>17S</i>	Range <i>38E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

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

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	<i>0</i>		<i>0</i>	<i>1240</i>
Flow Characteristics					
Pull	<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>✓</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 Injected for Waterflood if 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 failed down or continuous build up if applies.

UIC TESTING 2015

FOR RECORD ONLY

RL 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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