

MAY 28 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Fasken Oil</i>	API Number <i>30-025-05046</i>
Property Name <i>Wingard</i>	Well No. <i>13</i>

Surface Location									
UL- <i>P</i>	Section <i>24</i>	Township <i>12S</i>	Range <i>37E</i>		Feet from <i>990</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>2</i>	County <i>L.A.</i>

Well Status									
TA'D WELL YES	<i>NO</i>	SHUT-IN YES	<i>NO</i>	INJECTOR INJ	<i>SWD</i>	PRODUCER OIL	GAS	DATE <i>5/19/15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Ø</i>	<i>N/A</i>	<i>N/A</i>	<i>Ø</i>	<i>20</i>
Flow Characteristics					
Puff	<i>Ø N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Ø 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>Ø N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Ø 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.

BS 6/4/2015

Signature: <i>Neil Weeks</i>	OIL CONSERVATION DIVISION
Printed name: <i>Neil Weeks</i>	Entered into RBDMS
Title: <i>Production Foreman</i>	Re-test
E-mail Address: <i>neilw@forl.com</i>	
Date: <i>5/19/15</i>	
Phone: <i>432-661-3136</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

JUN 09 2015