

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

JUN 16 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>COG OPERATING LLC</i>	API Number <i>30-025-2572</i>
Property Name <i>SUPCO STATE</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>F</i>	Section <i>17</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>1980</i>	N/S Line <i>NORTH</i>	Feet From <i>1980</i>	E/W Line <i>WEST</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN ☒ YES	NO	INJ	INJECTOR SWD	OIL	PRODUCER <u>GAS</u>	DATE <i>6/2/2015</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csub	(E)Tubing
Pressure	<i>0</i>			<i>24</i>	<i>—</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>—</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 bleed down or continuous build up if applies.

FOR RECORD ONLY

JAN/OCD 6/16/15

Signature: <i>Steph Pinson</i>	OIL CONSERVATION DIVISION
Printed name: <i>STEPHEN PINSON</i>	Entered into RBDMS
Title: <i>SWD Pumper</i>	Re-test
E-mail Address: <i>SPINSON@CONCHORESOURCES.COM</i>	
Date: <i>6/2/2015</i>	Phone: <i>575-703-0956</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

JUN 17 2015