

JUN 30 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Diamond S Energy Company</i>	API Number <i>30-025-20944</i>
Property Name <i>New Mexico N State</i>	Well No. <i>8</i>

Surface Location

UL - Lot <i>D</i>	Section <i>30</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>350</i>	N/S Line <i>N</i>	Feet From <i>500</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 ☒	INJECTOR INJ ☐ SWD ☐	PRODUCER ☒ OIL ☐ GAS	DATE <i>6/30/2015</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>		<i>40</i>	<i>40</i>
Flow Characteristics	<i>no flow</i>				
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/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>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/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 7/2/15

Signature: <i>William K Dean</i>	OIL CONSERVATION DIVISION
Printed name: <i>WILLIAM K DEAN</i>	Entered into RBDMS
Title: <i>Lease Operator</i>	Re-test
E-mail Address: <i>DEANS PUMPING @ AOL.COM</i>	
Date: <i>6/30/15</i>	Phone: <i>575-631-5010 or 5011</i>
Witness: <i>Bill Samamah</i>	

INSTRUCTIONS ON BACK OF THIS FORM

JUN 16 2015

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