

JUL 09 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Mesquite</i>		API Number <i>30-025 26676 -</i>	
Property Name <i>West JAL Disposal</i>		Well No. <i>1 -</i>	

Surface Location									
UL - Lot <i>6</i>	Section <i>10</i>	Township <i>28</i>	Range <i>36E</i>		Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>Lea</i>

Well Status									
TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>7/1/15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	ϕ	ϕ		ϕ	<i>100</i>
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	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
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Injected for
Water	Y/N	Y/N	Y/N	Y/N	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 7/14/2015

Signature: <i>Clay L Wilson</i>		OIL CONSERVATION DIVISION	
Printed name: <i>CLAY L WILSON</i>		Entered into RBDMS	
Title: <i>PRESIDENT</i>		Re-test	
E-mail Address: <i>CLAY L WILSON@hotmail.com</i>			
Date: <i>7/1/15</i>	Phone: <i>575-706-1840</i>		
Witness: <i>[Signature]</i>			

INSTRUCTIONS ON BACK OF THIS FORM

JUL 22 2015