

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

JUL 20 2015

BRADENHEAD TEST REPORT

RECEIVED  
OGRID# 3044

Operator Name <i>Burgundy Oil &amp; Gas of NM, Inc.</i>	API Number <i>30-025-06176</i>
Property Name <i>Eunice monument Unit</i>	Well No. <i>13</i>

Surface Location

UL - Lot <i>G</i>	Section <i>19</i>	Township <i>20S</i>	Range <i>37E</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>
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Well Status

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	PRODUCER OIL <input checked="" type="radio"/> GAS	DATE <i>4/22/15</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>n/a</i>	<i>n/a</i>	<i>0</i>	<i>920</i>
<u>Flow Characteristics</u>					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
Down to nothing	<i>N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>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 8/3/2015*

Signature: <i>Cindy Campbell</i>	OIL CONSERVATION DIVISION
Printed name: <i>Cindy Campbell</i>	Entered into RBDMS
Title: <i>Production Acct.</i>	Re-test
E-mail Address: <i>ccampbell.bogi@att.net</i>	
Date: <i>4/22/15</i>	Phone: <i>432-684-4033</i>
Witness: <i>George Dore</i>	

INSTRUCTIONS ON BACK OF THIS FORM

AUG 04 2015