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

### BRADENHEAD TEST REPORT

RECEIVED

| Operator Name | API Number |
|---|---|
| Vanguard | 30-025-10324 |

| Property Name | Well No. |
|---|---|
| Cole St. | 4 |

### 7. Surface Location

| UL - Lot | Section | Township | Range | | Feet from | N/S Line | Feet From | E/W Line | County |
|---|---|---|---|---|---|---|---|---|---|
| E | 16 | 22S | 37 E | | 1980 | N | 660 | W | Lea |

### Well Status

| TA'D WELL | | SHUT-IN | | INJECTOR | | PRODUCER | | DATE |
|---|---|---|---|---|---|---|---|---|
| YES | NO | YES | NO | INJ | SWD | OIL | GAS | 8/10/15 |

### OBSERVED DATA

| | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csng | (E)Tubing |
|---|---|---|---|---|---|
| Pressure | 0 | N/A | N/A | 40 | 200 |
| Flow Characteristics | | | | | CO2 __ |
| Puff | Y / N | Y / N | Y / N | Y / N | WTR __ |
| Steady Flow | Y / N | Y / N | Y / N | Y / N | GAS __ |
| Surges | Y / N | Y / N | Y / N | Y / N | Type of Fluid |
| Down to nothing | Y / N | Y / N | Y / N | Y / N | Injected for |
| Gas or Oil | Y / N | Y / N | Y / N | Y / N | Waterflood if |
| Water | Y / N | Y / N | Y / N | Y / N | applies. |

Remarks – Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

BS 8/29/2015

| Signature: | OIL CONSERVATION DIVISION |
|---|---|
| Printed name: | Entered into RBDMS |
| Title: | Re-test |
| E-mail Address: | |
| Date: 8/10/15 | Phone: | |
| | Witness: | |

INSTRUCTIONS ON BACK OF THIS FORM