

AUG 21 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Breckel</i>	API Number <i>30-025-10653</i>
Property Name <i>King D</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>B</i>	Section <i>6</i>	Township <i>23S</i>	Range <i>37E</i>	Feet from <i>2117</i>	N/S Line <i>N</i>	Feet From <i>617</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>8/20/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Φ</i>	<i>N/A</i>	<i>N/A</i>	<i>15</i>	<i>10</i>
Flow Characteristics					
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 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.

Signature: <i>Kevin Breckel</i>	<i>138 8/29/2015</i> OIL CONSERVATION DIVISION
Printed name: <i>Kevin Breckel</i>	Entered into RBDMS
Title: <i>Production Superintendent</i>	Re-test
E-mail Address: <i>kbreckel@breckop.com / mesquite@valornet.com</i>	
Date: <i>8/20/15</i>	Phone: <i>(254) 559-0881</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015