

AUG 13 2015

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5-12

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

BRADENHEAD TEST REPORT

Operator Name <i>St. Johns + Johnson Operating Co.</i>		API Number <i>300-25-05186</i>	
Property Name <i>Dexter North Wolfcamp Unit</i>		Well No. <i>Trud 5 well No. 12</i>	

Surface Location									
UL - Lot <i>E</i>	Section <i>35</i>	Township <i>14S</i>	Range <i>37E</i>		Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>810</i>	E/W Line <i>W</i>	County <i>Lea</i>

Well Status									
TA'D WELL ☒ YES	NO	YES	SHUT-IN ☒ NO	INJECTOR ☒ INJ	SWD	OIL	PRODUCER GAS	DATE <i>8-3-15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics	<i>Nothing</i>				<i>Puff</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
					<i>to zero</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>Michael H. Petrek</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Michael H. PETREK</i>		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <i>8-3-2015</i>	Phone: <i>432-634-0386</i>		
Witness: <i>Bill Samanah</i>			

INSTRUCTIONS ON BACK OF THIS FORM

SEP 01 2015

SEP 02 2015