

AUG 25 2015

RECEIVED

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name <i>PPC Operating Company LLC</i>	API Number <i>30-025-12055</i>
Property Name <i>H. H. Rhodes B Fed NCT D</i>	Well No. <i>8</i>

7. Surface Location

UL - Lot <i>m</i>	Section <i>26</i>	Township <i>26S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL <i>YES</i>	SHUT-IN <i>NO</i>	INJECTOR <i>NO</i>	PRODUCER <i>OIL</i>	DATE <i>7/9/16</i>
-------------------------	----------------------	-----------------------	------------------------	-----------------------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>150</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>X</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
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.

PLEASE CONTACT:

Jana Spraberry
PPC Operating Company LLC
325-267-6050 (O) / 325-370-3948 (C)
jspraberry@plantationpetro.com

PLEASE CONTACT:

Signature: <i>Jana Spraberry for</i>	OIL CONSERVATION DIVISION	
Printed name: Rick Gillentine (505) 362-1931	Entered into RBDMS	
Title: Pumper	Re-test	
E-mail Address: deanspumping@aol.com		
Date: <i>7/8/15</i>	Phone:	
Witness: <i>[Signature]</i>		

INSTRUCTIONS ON BACK OF THIS FORM

SEP 16 2015