

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

AUG 28 2015

BRADENHEAD TEST REPORT

RECEIVED

|                                                                       |                      |                                                                                |                     |                                                                              |                          |                                                                       |                          |                         |                            |
|-----------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------|--------------------------|-------------------------|----------------------------|
| Operator Name<br><i>EOR Operating</i>                                 |                      |                                                                                |                     |                                                                              |                          | API Number<br><i>30-011-10012</i>                                     |                          |                         |                            |
| Property Name<br><i>Milnesand SA Unit</i>                             |                      |                                                                                |                     |                                                                              |                          |                                                                       |                          | Well No.<br><i>#127</i> |                            |
| 7. Surface Location                                                   |                      |                                                                                |                     |                                                                              |                          |                                                                       |                          |                         |                            |
| UL - Lot<br><i>F</i>                                                  | Section<br><i>07</i> | Township<br><i>08S</i>                                                         | Range<br><i>35E</i> |                                                                              | Feet from<br><i>1975</i> | N/S Line<br><i>N</i>                                                  | Feet From<br><i>1901</i> | E/W Line<br><i>W</i>    | County<br><i>Roosevelt</i> |
| Well Status                                                           |                      |                                                                                |                     |                                                                              |                          |                                                                       |                          |                         |                            |
| TA'D WELL<br>YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | SHUT-IN<br>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |                     | INJECTOR<br><input checked="" type="checkbox"/> SWD <input type="checkbox"/> |                          | PRODUCER<br>OIL <input type="checkbox"/> GAS <input type="checkbox"/> |                          | DATE<br><i>5-24-15</i>  |                            |

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                    |
|----------------------|------------|--------------|--------------|-------------|------------------------------|
| Pressure             | <i>-0-</i> |              |              | <i>-0-</i>  | <i>500-</i>                  |
| Flow Characteristics |            |              |              |             |                              |
| Pull                 | <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 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>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>  | Water flood if               |
|                      |            |              |              |             | applies.                     |

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

|                                                   |                            |                           |  |
|---------------------------------------------------|----------------------------|---------------------------|--|
| Signature: <i>Matt Howell</i>                     |                            | OIL CONSERVATION DIVISION |  |
| Printed name: <i>MATT HOWELL</i>                  |                            | Entered into RBDMS        |  |
| Title: <i>Lease Operator</i>                      |                            | Re-test                   |  |
| E-mail Address: <i>mhowell@enhancedoilres.com</i> |                            |                           |  |
| Date: <i>5-24-15</i>                              | Phone: <i>575-607-5947</i> |                           |  |
| Witness:                                          |                            |                           |  |

INSTRUCTIONS ON BACK OF THIS FORM

SEP 16 2015