

AUG 28 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>EOR operating</i>						API Number <i>38-041-10119</i>			
Property Name <i>Horton Fed</i>						Well No. <i>#25</i>			
1. Surface Location									
UL - Lot <i>F</i>	Section <i>29</i>	Township <i>08S</i>	Range <i>35E</i>	Feet from <i>1650</i>	N/S Line <i>N</i>	Feet From <i>1652</i>	E/W Line <i>W</i>	County <i>Roosa evet</i>	
Well Status									
TA'D WELL YES ☐ NO ☒		SHUT-IN YES ☐ NO ☒		INJECTOR <i>INJ</i>		PRODUCER OIL ☐ GAS ☐		DATE <i>5-31-15</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>-0-</i>			<i>-0-</i>	<i>-0-</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
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

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

BB 9/15/2015

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>5-31-15</i>	Phone: <i>575-607-5947</i>		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM

SEP 16 2015