

SEP 08 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>CAND Retroleum.</i>	API Number <i>3004120477</i>
Property Name <i>Cone Fed Tomahawk Field</i>	Well No. <i>8</i>

Surface Location									
UL - Lot <i>8</i>	Section <i>31</i>	Township <i>7S</i>	Range <i>37E</i>	Feet from <i>1660</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Boone</i>	

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ INJ	SWD	OIL PRODUCER OIL	GAS	DATE <i>8/25/14</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>-0-</i>				<i>1200</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.

Signature: <i>Robert McKenzie</i>	<i>BS 9/22/2015</i> OIL CONSERVATION DIVISION
Printed name: <i>Robert McKenzie</i>	Entered into RBDMS
Title: <i>SR Field Ops Mgr.</i>	Re-test
E-mail Address: <i>robert.mckenzie@nmservices.com</i>	
Date: <i>8/25/14</i>	Phone: <i>432-425-3150</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 24 2015