

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

HOBBS OCD

SEP 17 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Ram Energy LLC</i>	API Number <i>30-025-12289</i>
Property Name <i>West Dolarhide Queen Sand Unit</i>	Well No. <i>35</i>

7. Surface Location

UL - Lot <i>5</i>	Section <i>31</i>	Township <i>24S</i>	Range <i>38E</i>	Feet from <i>1980</i>	N/S Line <i>FSL</i>	Feet From <i>1650</i>	E/W Line <i>FEL</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN ☒ YES	NO	INJECTOR ☒ INJ	SWD	OIL PRODUCER GAS	DATE <i>7-22-15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>1000</i>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	☒ Y / N	CO2 —
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR —
Surges	Y / N	Y / N	Y / N	Y / N	GAS —
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	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.

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Chris Lamberson</i>	Entered into RBDMS
Title: <i>SR Production Foreman</i>	Re-test
E-mail Address: <i>clamberson@ramenergy.net</i>	
Date: <i>7-22-15</i>	Phone: <i>405-830-1903</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015