

SEP 16 2015

District 1  
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

RECEIVED

## BRADENHEAD TEST REPORT

|                                                    |                                   |
|----------------------------------------------------|-----------------------------------|
| Operator Name<br><i>MATADOR Production Company</i> | API Number<br><i>30-025-27336</i> |
| Property Name<br><i>Young Deep Unit</i>            | Well No.<br><i>05</i>             |

## Surface Location

|                      |                      |                        |                     |                         |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><i>B</i> | Section<br><i>10</i> | Township<br><i>18S</i> | Range<br><i>32E</i> | Feet from<br><i>660</i> | N/S Line<br><i>N</i> | Feet From<br><i>1980</i> | E/W Line<br><i>E</i> | County<br><i>Lea</i> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------|

## Well Status

|                                                                            |                                                                          |                                                  |     |     |          |     |                          |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------|-----|-----|----------|-----|--------------------------|
| TA'D WELL<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | SHUT-IN<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | INJECTOR<br><input checked="" type="radio"/> INJ | SWD | OIL | PRODUCER | GAS | DATE<br><i>8-26-2015</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                 | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> N | CO2 <input type="checkbox"/> |
| Steady Flow          | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> N | WTR <input type="checkbox"/> |
| Surges               | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> N | GAS <input type="checkbox"/> |
| Down to nothing      | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> N | Type of Fluid                |
| Gas or Oil           | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> N | Injected for                 |
| Water                | <input checked="" type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input type="radio"/> Y / <input type="radio"/> N | <input checked="" type="radio"/> Y / <input type="radio"/> 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>May Stevens</i>                        | <i>PS 9/25/15</i><br>OIL CONSERVATION DIVISION |
| Printed name: <i>MAY Stevens</i>                     | Entered into RBDMS                             |
| Title: <i>Production Superintendent</i>              | Re-test                                        |
| E-mail Address: <i>ostevens@matadorresources.com</i> |                                                |
| Date: <i>9-3-2015</i>                                | Phone: <i>575-626-1905</i>                     |
| Witness:                                             |                                                |

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015