

SEP 23 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Momentum Operating</i>	API Number <i>30-025-28027</i>
Property Name <i>Teas Yates Unit</i>	Well No. <i>#12</i>

Surface Location

UL - Lot <i>E</i>	Section <i>18</i>	Township <i>20 S</i>	Range <i>34 E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>10</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒	SHUT-IN YES ☒	INJECTOR ☒	PRODUCER OIL ☒	DATE <i>8-17-15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>Q</i>			<i>Q</i>	<i>125</i>
Flow Characteristics					
Puff	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	CO2 ☐
Steady Flow	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	WTR ☒
Surges	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	GAS ☐
Down to nothing	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	Type of Fluid
Gas or Oil	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	Injected for
Water	<i>Y / ☒</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / ☒</i>	Waterhood 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>John Smith</i>	OIL CONSERVATION DIVISION
Printed name: <i>John Smith</i>	Entered into RBDMS
Title: <i>Pumper</i>	Re-test
E-mail Address: <i>jdsmith@plateauetel.net</i>	
Date: <i>8-17-15</i>	Phone: <i>575-390-2051</i>
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015