

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>30-025-28033</i>
Property Name <i>Texas Yates Unit</i>	Well No. <i>#132</i>

Surface Location

UL - Lot <i>m</i>	Section <i>11</i>	Township <i>20S</i>	Range <i>33E</i>	Feet from <i>10</i>	N/S Line <i>S</i>	Feet From <i>660</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 <i>(IN)</i>	PRODUCER OIL	GAS	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>22</i>			<i>22</i>	<i>222'</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.

Signature: <i>John Smith</i>	OIL CONSERVATION DIVISION Entered into RBDMS Re-test Date: <i>8-17-15</i> Phone: <i>575-390-2051</i> Witness: <i>[Signature]</i>
Printed name: <i>John Smith</i>	
Title: <i>Pumper</i>	
E-mail Address: <i>jdsmith@plateau.net</i>	
Date: <i>8-17-15</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015