

SEP 17 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Ram Energy LLC</i>	API Number <i>30-025-30196</i>
Property Name <i>West Dollarhide Queen Sand Unit</i>	Well No. <i>108</i>

Surface Location

UL - Lot <i>E</i>	Section <i>29</i>	Township <i>24S</i>	Range <i>38E</i>	Feet from <i>2310</i>	N/S Line <i>FNL</i>	Feet From <i>380</i>	E/W Line <i>FNL</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>7-21-15</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>0</i>	<i>0</i>
Flow Characteristics					
Puff	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 Habras</i>	Entered into RBDMS
Title: <i>SL Production Foreman</i>	Re-test
E-mail Address: <i>chabras@ramenergy.net</i>	
Date: <i>7-21-15</i>	
Phone: <i>405-830-1903</i>	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015