

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>30-025-30290</i>	
Property Name <i>West Dolarhid Queen Sand Unit</i>		Well No. <i>128</i>	

Surface Location

UL - Lot <i>2</i>	Section <i>19</i>	Township <i>24S</i>	Range <i>38E</i>	Feet from <i>660</i>	N/S Line <i>FSL</i>	Feet From <i>2175</i>	E/W Line <i>FWL</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	SHUT-IN NO	INJECTOR <i>INJ</i>	PRODUCER OIL	GAS	DATE <i>7-21-15</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>0</i>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	<i>Y</i> / 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.

*Run MIT on well.
pressured up to 580 psi.
30 minute chart*

Signature: <i>Chk</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Chris L. Abrams</i>		Entered into RBDMS	
Title: <i>SR. Production - Failure</i>		Re-test	
E-mail Address: <i>clabrams@ramenergy.net</i>			
Date: <i>7-21-15</i>	Phone: <i>405-830-1703</i>		
Witness: <i>[Signature]</i>			

INSTRUCTIONS ON BACK OF THIS FORM

SEP 28 2015