

AUG 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>COG Operating LLC</i>	API Number <i>30-025-42461</i>
Property Name <i>Wild Cobra 1 State SWD</i>	Well No. <i>2</i>

2. Surface Location

UL - Lot <i>C</i>	Section <i>1</i>	Township <i>19S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>1650</i>	E/W Line <i>W</i>	County <i>Lea</i> ✓
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ INJECTOR	<i>SWD</i>	OIL	PRODUCER GAS	DATE <i>7-31-2015</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<i>0</i>	<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.

New SWD conversion

Signature:	<i>B8 10/3/15</i>	OIL CONSERVATION DIVISION
Printed name: <i>Raymond Galardon / Stormi Davis</i>	Entered into RBDMS	
Title:	Re-test	
E-mail Address:		
Date:	Phone:	
	Witness: <i>Bill Lemanick</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 08 2015