

OCT 06 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>GP2 Energy</i>	API Number <i>30025234280000</i>
Property Name <i>New Mexico State</i>	Well No. <i>#63</i>

Surface Location

UL - Lot <i>H</i>	Section <i>30</i>	Township <i>22</i>	Range <i>37</i>	Feet from <i>2540</i>	N/S Line <i>N</i>	Feet From <i>1280</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	PRODUCER <i>OIL</i>	GAS	DATE <i>7-29-15</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>14</i>	<i>21</i>
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / <i>N</i>	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	Y / <i>N</i>	WTR ☒
Surges	Y / N	Y / N	Y / N	Y / <i>N</i>	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	<i>N</i> / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / <i>N</i>	Injected for
Water	Y / N	Y / N	Y / N	Y / <i>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>David Shivers</i>	OIL CONSERVATION DIVISION
Printed name: <i>DAVID SHIVERS</i>	Entered into RBDMS <i>BS</i>
Title: <i>Production Foreman</i>	Re-test
E-mail Address: <i>dshivers@gp2energy.com</i>	
Date: <i>7-29-15</i>	Phone:
Witness: <i>Bob Cho</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 16 2015