

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

OCT 06 2015

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>GP 2 Energy</i>	API Number <i>30025238220000</i>
Property Name <i>New Mexico State</i>	Well No. <i>72</i>

Surface Location									
UL - Lot <i>5</i>	Section <i>20</i>	Township <i>22</i>	Range <i>37</i>	Feet from <i>2310</i>	N/S Line <i>S</i>	Feet From <i>1750</i>	E/W Line <i>E</i>	County <i>Lea</i>	

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ	INJECTOR SWD	PRODUCER <i>OIL</i>	GAS	DATE <i>8-27-15</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>12 #</i>			<i>12</i>	<i>18</i>
Flow Characteristics	<i>Dry GAS</i>				
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>7</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>7</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>7</i>
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.

A - Bled off to light steady blow.

Signature: <i>David Shivers</i>	<i>B8 10/15/15</i>
Printed name: <i>DAVID Shivers</i>	OIL CONSERVATION DIVISION
Title: <i>Production Foreman</i>	Entered into RBDMS <i>AS</i>
E-mail Address: <i>dshivers@gp2energy.com</i>	Re-test
Date: <i>8-27-15</i>	
Phone:	
Witness: <i>Dillard BARRACK</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 16 2015