

OCT 06 2015

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>GP2 Energy</i>	* API Number <i>30025242540000</i>
Property Name <i>New Mexico State M</i>	Well No. <i>65</i>

7. Surface Location

UL - Lpt <i>K</i>	Section <i>29</i>	Township <i>22</i>	Range <i>37</i>	Feet from <i>2630</i>	N/S Line <i>S</i>	Feet From <i>1330</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	INJECTOR <i>INJ</i>	SWD	PRODUCER OIL	GAS	DATE <i>7-29-15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	<i>D</i>				<i>460</i>
Flow Characteristics					
Puff	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <i>___</i>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <i>___</i>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <i>___</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.

Signature: <i>David Shivers</i>	OIL CONSERVATION DIVISION
Printed name: <i>DAVID SHIVERS</i>	Entered into RBDMS <i>6-c</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>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 16 2015