

OCT 06 2015

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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>30025242560000</i>	
Property Name <i>New Mexico State St</i>		Well No. <i>67</i>	

1. Surface Location

UL - Lot <i>I</i>	Section <i>30</i>	Township <i>22</i>	Range <i>37</i>	Feet from <i>1406</i>	N/S Line <i>S</i>	Feet From <i>1262</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	<i>OIL</i> PRODUCER	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>14</i>	<i>25</i>
Flow Characteristics					
Puff	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / N	CO2 ☐
Steady Flow	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / N	WTR ☐
Surges	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / N	GAS ☐
Down to nothing	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / N	Type of Fluid
Gas or Oil	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / N	Injected for
Water	Y / N	<i>Y</i> / N	Y / N	<i>Y</i> / 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.

Signature: <i>David Shivers</i>		OIL CONSERVATION DIVISION	
Printed name: <i>DAVID Shivers</i>		Entered into RBDMS <i>GC</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