

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>GP 2 Energy</i>	API Number <i>30025244570000</i>
Property Name <i>New Mexico State M</i>	Well No. <i>56</i>

Surface Location									
UL Lot <i>8</i>	Section <i>19</i>	Township <i>22</i>	Range <i>37</i>	Feet from <i>148</i>	N/S Line <i>S</i>	Feet From <i>1300</i>	E/W Line <i>E</i>	County <i>Lea</i>	

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

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>			<i>10</i>	<i>18</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>	<i>BS 10/14/15</i>
Printed name: <i>DAVID Shivers</i>	OIL CONSERVATION DIVISION
Title: <i>Production Foreman</i>	Entered into RBDMS <i>BS</i>
E-mail Address: <i>dshivers@gp2energy.com</i>	Re-test
Date:	
Phone:	
Witness: <i>Dillard Barrack</i>	

INSTRUCTIONS ON BACK OF THIS FORM

OCT 16 2015