

OCT 26 2015

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

BRADENHEAD TEST REPORT

Operator Name <i>Siana</i>	API Number <i>30-025-28554</i>
Property Name <i>APD Fed.</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>0</i>	Section <i>10</i>	Township <i>23S</i>	Range <i>34E</i>	Feet from <i>990</i>	N/S Line <i>S</i>	Feet From <i>1940</i>	E/W Line <i>E</i>	County <i>LCA</i>
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Well Status

TA'D WELL YES <i>NO</i>	SHUT-IN YES <i>NO</i>	INJ <i>SWD</i>	PRODUCER OIL <i>GAS</i>	DATE <i>10/21/15</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>N/A</i>	<i>2/A</i>	<i>0</i>	<i>650</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>X</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>W K Dean</i>	OIL CONSERVATION DIVISION
Printed name: <i>WILLIAM K DEAN</i>	Entered into RBDMS <i>GR</i>
Title: <i>LEASE OPER.</i>	Re-test
E-mail Address:	
Date: <i>10/21/15</i>	Phone:
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 04 2015