

NOV 19 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <u>Legacy Reserves Operations LP</u>	API Number <u>3002511476</u>
Property Name <u>LJU</u>	Well No. <u>55</u>

Surface Location

UL - Lot <u>2</u>	Section <u>6</u>	Township <u>2SS</u>	Range <u>37E</u>	Feet from <u>2310</u>	N/S Line <u>S</u>	Feet From <u>1650</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR <u>INJ</u>	PRODUCER OIL	GAS	DATE <u>7/8/15</u>
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OBSERVED DATA

	(A) Surface	(B) Interm (1)	(C) Interm (2)	(D) Prod Casing	(E) Tubing
Pressure					
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	Y / N	CO2 ___
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ___
Surges	Y / N	Y / N	Y / N	Y / N	GAS ___
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Well Plugged - 3-5-15

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS <u>BD</u>
Title:	Re-test
E-mail Address:	
Date:	Phone:
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

NOV 30 2015