

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<br><u>Legacy Reserves Operations LP</u> | * API Number<br><u>3002511633</u> |
| Property Name<br><u>LJV</u>                           | Well No.<br><u>93</u>             |

\* Surface Location

|                    |                      |                        |                     |                         |                      |                         |                      |                      |
|--------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL Lot<br><u>P</u> | Section<br><u>17</u> | Township<br><u>25S</u> | Range<br><u>37E</u> | Feet from<br><u>660</u> | N/S Line<br><u>S</u> | Feet From<br><u>660</u> | E/W Line<br><u>E</u> | County<br><u>Lea</u> |
|--------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                  |                                     |                |                                     |                                      |                 |     |                 |                       |
|------------------|-------------------------------------|----------------|-------------------------------------|--------------------------------------|-----------------|-----|-----------------|-----------------------|
| TA'D WELL<br>YES | <input checked="" type="radio"/> NO | SHUT-IN<br>YES | <input checked="" type="radio"/> NO | <input checked="" type="radio"/> INT | INJECTOR<br>SWD | OIL | PRODUCER<br>GAS | DATE<br><u>7/8/15</u> |
|------------------|-------------------------------------|----------------|-------------------------------------|--------------------------------------|-----------------|-----|-----------------|-----------------------|

OBSERVED DATA

|                      | (A) Surface                            | (B) Interm(1) | (C) Interm(2) | (D) Prod Casing                        | (E) Tubing                                                 |
|----------------------|----------------------------------------|---------------|---------------|----------------------------------------|------------------------------------------------------------|
| Pressure             | <u>0</u>                               |               |               | <u>0</u>                               | <u>520</u>                                                 |
| Flow Characteristics |                                        |               |               |                                        |                                                            |
| Pull                 | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | <input checked="" type="radio"/> Y / N | CO2 <input checked="" type="checkbox"/>                    |
| Steady Flow          | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | Y / N                                  | WTR <input checked="" type="checkbox"/>                    |
| Surges               | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | Y / N                                  | GAS <input checked="" type="checkbox"/>                    |
| Down to nothing      | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | <input checked="" type="radio"/> Y / N | Type of Fluid<br>Injected for<br>Waterflood if<br>applies. |
| Gas or Oil           | <input checked="" type="radio"/> Y / N | Y / N         | Y / N         | <input checked="" type="radio"/> 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.

A-D. Gas

|                                    |                              |
|------------------------------------|------------------------------|
| Signature: <u>Steve Dittman</u>    | OIL CONSERVATION DIVISION    |
| Printed name: <u>Steve Dittman</u> | Entered into RBDMS <u>BS</u> |
| Title: <u>Well Tech</u>            | Re-test                      |
| E-mail Address:                    |                              |
| Date: <u>9/15/15</u>               | Phone: <u>432 312 4757</u>   |
| Witness:                           |                              |

INSTRUCTIONS ON BACK OF THIS FORM

NOV 30 2015