

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

BRADENHEAD TEST REPORT

Operator Name <i>Smith + Mann</i>		API Number <i>30-025-20350</i>	
Property Name <i>Knight</i>		Well No. <i>11</i>	

Surface Location

UL - Lot <i>M</i>	Section <i>22</i>	Township <i>24S</i>	Range <i>37E</i>	Feet from <i>5</i>	N/S Line <i>S</i>	Feet From <i>1315</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES	<i>NO</i>	SHUT-IN YES	<i>NO</i>	INJECTOR <i>NO</i>	SWD	OIL	PRODUCER GAS	DATE <i>11/24/15</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>N/A</i>	<i>0</i>	<i>0</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 Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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

Signature: <i>Jason Smith</i>		<i>BS 12/1/15</i> OIL CONSERVATION DIVISION	
Printed name: <i>Jason Smith</i>		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <i>11/24/15</i>	Phone:		
Witness: <i>James Bower</i>			

INSTRUCTIONS ON BACK OF THIS FORM

DEC 02 2015