

DEC 01 2015

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Boge, Inc</i>	API Number <i>30-025-32650</i>
Property Name <i>Staplin State Acl</i>	Well No. <i>6</i>

Surface Location

UL - Lot <i>N</i>	Section <i>30</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>525</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR INJ	SWD	<u>OIL</u>	PRODUCER GAS	DATE <i>12-1-15</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>0</i>		<i>16</i>	<i>16</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
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>Gary Morgan</i>	OIL CONSERVATION DIVISION
Printed name: <i>Gary Morgan</i>	Entered into RBDMS <i>BB</i>
Title: <i>Pumper</i>	Re-test
E-mail Address:	
Date: <i>12-1-15</i>	Phone: <i>575-637-4597</i>
Witness: <i>Bill [Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

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