

DEC 04 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Legacy Reserves Operating LA</i>	API Number <i>3002538329</i>
Property Name <i>LmPSu</i>	Well No. <i>604</i>

Surface Location

UL - Lot <i>G</i>	Section <i>27</i>	Township <i>22S</i>	Range <i>37E</i>	Feet from <i>1600</i>	N/S Line <i>N</i>	Feet From <i>1525</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL <i>YES</i>	SHUT-IN <i>NO</i>	INJECTOR <i>NO</i>	PRODUCER <i>OIL</i>	DATE
-------------------------	----------------------	-----------------------	------------------------	------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>8</i>			<i>75</i>	<i>75</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☐
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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.

A gas

Signature: <i>Steve D. Han</i>	OIL CONSERVATION DIVISION
Printed name: <i>Steve D. Han</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>11/22/15</i>	Phone:
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 09 2015

IN RBDMS
gmb