

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

NOV 22 2015

BRADENHEAD TEST REPORT

Operator Name <u>Legacy Reserves</u>	Property Name <u>CJV</u>	REC# <u>300251162</u>	Well No. <u>220</u>
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2. Surface Location

UL - Lot <u>M</u>	Section <u>19</u>	Township <u>24S</u>	Range <u>37E</u>	Feet from <u>660</u>	N/S Line <u>S</u>	Feet From <u>628</u>	E/W Line <u>W</u>	County <u>Lea</u>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJ NO	INJECTOR SWD	PRODUCER OIL	GAS	DATE <u>5/13/15</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>Q</u>	<u>Q</u>		<u>Q</u>	<u>730</u>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	Y / N	CO2 —
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR <u>✓</u>
Surges	Y / N	Y / N	Y / N	Y / N	GAS —
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood if
					applies.

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

Signature: <u>Steve Dittman</u>	<u>B8 12/9/15</u>
Printed name: <u>Steve Dittman</u>	OIL CONSERVATION DIVISION
Title: <u>Well Tech</u>	Entered into RBDMS <u>B8</u>
E-mail Address: <u>sdittman@legacylp.com</u>	Re-test
Date: <u>5/15/15</u>	
Phone: <u>432 312 4757</u>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 11 2015