

HOBBS OCD

DEC 18 2015

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Lesany Reserver Operations LP</i>	API Number <i>3002524904</i>
Property Name <i>Metex</i>	Well No. <i>3</i>

² Surface Location

UL - Lot <i>F</i>	Section <i>35</i>	Township <i>22N</i>	Range <i>37E</i>	Feet from <i>1986</i>	N/S Line <i>N</i>	Feet from <i>1986</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 ☒	INJ ☐	INJECTOR SWD ☐	☒ OIL	PRODUCER GAS ☐	DATE <i>10/1/15</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>30</i>	<i>30</i>
Flow Characteristics					
Puff	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	CO2 ☐
Steady Flow	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	WTR ☐
Surges	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	GAS ☐
Down to nothing	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	Type of Fluid Injected for Waterflood if applicable
Gas or Oil	☒ Y / ☐ N	☐ Y / ☐ N	☐ Y / ☐ N	☐ 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 - 545

Signature: <i>Diana Dittler</i>	<i>BS 12/23/15</i>
Printed name: <i>Susan D. Han</i>	OIL CONSERVATION DIVISION
Title: <i>Well Tech</i>	Entered into RBDMS <i>BS</i>
E-mail Address:	Re-test
Date: <i>12/8/15</i>	
Phone:	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 31 2015