

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<br><u>Legacy Reserves Operations LP</u> | API Number<br><u>3002531760</u> |
| Property Name<br><u>SJU</u>                           | Well No.<br><u>F-182N</u>       |

Surface Location

|                      |                      |                        |                     |                          |                      |                          |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot<br><u>N</u> | Section<br><u>13</u> | Township<br><u>25S</u> | Range<br><u>37E</u> | Feet from<br><u>1150</u> | N/S Line<br><u>S</u> | Feet From<br><u>2590</u> | E/W Line<br><u>W</u> | County<br><u>Lea</u> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|

Well Status

|                              |                            |                          |     |     |          |     |                         |
|------------------------------|----------------------------|--------------------------|-----|-----|----------|-----|-------------------------|
| TA'D WELL<br>YES <u>(NO)</u> | SHUT-IN<br>YES <u>(NO)</u> | INJECTOR<br><u>(INJ)</u> | SWD | OIL | PRODUCER | GAS | DATE<br><u>10/18/15</u> |
|------------------------------|----------------------------|--------------------------|-----|-----|----------|-----|-------------------------|

OBSERVED DATA

|                      | (A) Surface | (B) Interm (1) | (C) Interm (2) | (D) Prod Casing | (E) Tubing    |
|----------------------|-------------|----------------|----------------|-----------------|---------------|
| Pressure             | <u>0</u>    |                |                | <u>0</u>        | <u>640</u>    |
| Flow Characteristics |             |                |                |                 |               |
| Puff                 | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | CO2 <u>—</u>  |
| Steady Flow          | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | WTR <u>✓</u>  |
| Surges               | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | GAS <u>—</u>  |
| Down to nothing      | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | Type of Fluid |
| Gas or Oil           | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | Injected for  |
| Water                | <u>Y/N</u>  | <u>Y/N</u>     | <u>Y/N</u>     | <u>Y/N</u>      | 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.

A.D. gas

|                                     |                              |
|-------------------------------------|------------------------------|
| Signature: <u>Steven Dittmer</u>    | OIL CONSERVATION DIVISION    |
| Printed name: <u>Steven Dittmer</u> | Entered into RBDMS <u>BS</u> |
| Title: <u>Well Tech</u>             | Re-test                      |
| E-mail Address:                     |                              |
| Date: <u>12/2/15</u>                | Phone:                       |
|                                     | Witness:                     |

INSTRUCTIONS ON BACK OF THIS FORM

DEC 31 2015