

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

HOBBS OCD

DEC 18 2015

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Legacy Reserves Operating LP</i>	*API Number <i>3002531828</i>
Property Name <i>SJU</i>	Well No. <i>E-210</i>

* Surface Location

UL - Lot <i>L</i>	Section <i>24</i>	Township <i>25S</i>	Range <i>37E</i>	Feet from <i>2500</i>	N/S Line <i>S</i>	Feet From <i>150</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR <i>(INJ)</i>	SWD	OIL	PRODUCER GAS	DATE <i>10/18/15</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>500</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>✓</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
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 applicable
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>Steven Dittman</i>	OIL CONSERVATION DIVISION
Printed name: <i>Steven Dittman</i>	Entered into RBDMS <i>BS</i>
Title: <i>Well Tech</i>	Re-test
E-mail Address:	
Date: <i>12/2/15</i>	Phone:
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

DEC 31 2015