

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

BRADENHEAD TEST REPORT

Operator Name <i>Legacy Reserves Operating LP</i>	*API Number <i>3002532076</i>
Property Name <i>SJU</i>	Well No. <i>F 250</i>

* Surface Location

UL - Lot <i>1C</i>	Section <i>25</i>	Township <i>25N</i>	Range <i>37E</i>	Feet from <i>1650</i>	N/S Line <i>S</i>	Feet From <i>1650</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	<i>(NO)</i>	SHUT-IN YES	<i>(NO)</i>	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 Csg	(E) Tubing
Pressure	<i>A</i>			<i>0</i>	<i>875</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>	WIR <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 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. say

Signature: <i>Steve Dittus</i>	OIL CONSERVATION DIVISION
Printed name: <i>STEVEN D. DITTUS</i>	Entered into RBDMS
Title: <i>Well Tech</i>	Re-test
E-mail Address:	
Date: <i>12/2/15</i>	Phone:
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

JAN 05 2016

In Job