

HOBBS OCD
JAN 19 2016
RECEIVED

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>3002532352</i>	
Property Name <i>SJU</i>		Well No. <i>6-184</i>	

Surface Location

UL - Lot <i>0</i>	Section <i>13</i>	Township <i>25S</i>	Range <i>27E</i>	Feet from <i>160</i>	N/S Line <i>S</i>	Feet From <i>1450</i>	E/W Line <i>E</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>Q</i>			<i>Q</i>	<i>Q</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 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. Sur Failed MIT

Signature: <i>Steve Dittmar</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Steven D. Dittmar</i>		Entered into RBDMS <i>SD</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

JAN 20 2016