



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

BRADENHEAD TEST REPORT

Operator Name <i>Linn Operating</i>		API Number <i>30-025-11607</i>	
Property Name <i>Langlie Matrix Queen Unit</i>		Well No. <i>11</i>	

7. Surface Location									
UL - Lot <i>B</i>	Section <i>15</i>	Township <i>25 S</i>	Range <i>37 E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>Lea</i>	

Well Status

TA'D WELL YES ☒	SHUT-IN YES ☒	INJECTOR ☒	SWD	PRODUCER OIL	GAS	DATE <i>2/16/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>			<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	Y / ☒	Y / N	Y / N	☒ / N	CO2 ___
Steady Flow	Y / ☒	Y / N	Y / N	Y / ☒	WTR ___
Surges	Y / ☒	Y / N	Y / N	Y / ☒	GAS ___
Down to nothing	<i>φ</i> / N	Y / N	Y / N	☒ / N	Type of Fluid
Gas or Oil	Y / ☒	Y / N	Y / N	Y / ☒	Injected for
Water	Y / ☒	Y / N	Y / N	☒ / N	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.

Signature: <i>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name: <i>JUNIOR CONTRERAS</i>		Entered into RBDMS <i>CF</i>	
Title:		Re-test	
E-mail Address:			
Date: <i>2/16/16</i>	Phone: <i>575/909-0031</i>		
Witness: <i>Carl Flowers</i>			

FEB 25 2016

In
CF.