

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

BRADENHEAD TEST REPORT

|                                             |                          |
|---------------------------------------------|--------------------------|
| Operator Name<br>Cross Timbers Energy, LLC  | API Number<br>3002523996 |
| Property Name<br>NORTH VACUUM ABO EAST UNIT | Well No.<br>2            |

7. Surface Location

|               |              |                 |              |                   |                 |                  |                 |               |
|---------------|--------------|-----------------|--------------|-------------------|-----------------|------------------|-----------------|---------------|
| UL - Lot<br>L | Section<br>7 | Township<br>17S | Range<br>35E | Feet from<br>1993 | N/S Line<br>FSL | Feet From<br>660 | E/W Line<br>FWL | County<br>LEA |
|---------------|--------------|-----------------|--------------|-------------------|-----------------|------------------|-----------------|---------------|

Well Status

|                  |                |                 |                 |                 |
|------------------|----------------|-----------------|-----------------|-----------------|
| TA'D Well<br>YES | SHUT-IN<br>YES | INJECTOR<br>INJ | PRODUCER<br>OIL | DATE<br>2/23/16 |
|------------------|----------------|-----------------|-----------------|-----------------|

OBSERVED DATA

|                      | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing          |
|----------------------|----------------|--------------|--------------|-------------|--------------------|
| Pressure             | φ              | N/A          | N/A          | φ           | 4100               |
| Flow Characteristics |                |              |              |             |                    |
| Puff                 | Y / N          | Y / N        | Y / N        | Y / N       | CO2 _____          |
| Steady Flow          | Y / N          | Y / N        | Y / N        | Y / N       | WTR _____          |
| Surges               | Y / N          | Y / N        | Y / N        | Y / N       | GAS _____          |
| Down to nothing      | Y / N          | Y / N        | Y / N        | Y / N       | If applicable type |
| Gas or Oil           | Y / N          | Y / N        | Y / N        | Y / N       | fluid injected for |
| Water                | Y / N          | Y / N        | Y / N        | Y / N       | Waterflood         |

If bradenhead flowed water, check all of the descriptions that apply:

|       |       |       |        |       |
|-------|-------|-------|--------|-------|
| CLEAR | FRESH | SALTY | SULFUR | BLACK |
|-------|-------|-------|--------|-------|

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

BS 3/1/16

|                                                   |                                |
|---------------------------------------------------|--------------------------------|
| Signature: <i>Jose Casas</i>                      | OIL CONSERVATION DIVISION      |
| Printed name: Jose Casas                          | Entered into RBDMS <i>C.B.</i> |
| Title: Lease Operator                             | Re-test                        |
| E-mail Address: <i>jcasas@clfieldservices.com</i> |                                |
| Date: <i>2/23/16</i>                              |                                |
| Phone: <i>575-746-7220</i>                        |                                |
| Witness: <i>Jose Casas</i>                        |                                |

*In KH*

MAR 01 2016