

HOBBS OCD

MAR 07 2016

RECEIVED

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>30-025-20378</i>
Property Name <i>LEA 403 STATE</i>	Well No. <i>4</i>

1. Surface Location

UL - Lot <i>D</i>	Section <i>17</i>	Township <i>18S</i>	Range <i>35E</i>	Feet from <i>510</i>	N/S Line <i>N</i>	Feet From <i>510</i>	E/W Line <i>N</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJ	INJECTOR SWD	☒ OIL	PRODUCER GAS	DATE <i>2/22/16</i>
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OBSERVED DATA

	(A) Surface	(B) Interm (1)	(C) Interm (2)	(D) Prod Csmg	(E) Tubing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	<i>Y (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>(Y) N</i>	CO2 ☐
Steady Flow	<i>Y (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y (N)</i>	WTR ☐
Surges	<i>Y (N)</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y (N)</i>	GAS ☐
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.

(D) - Puff of gas. Down to nothing

Signature: <i>Contreiras</i>	<i>BS 3/11/16</i>
Printed name: <i>JUNIOR CONTRERAS</i>	OIL CONSERVATION DIVISION
Title: <i>PRODUCTION SPECIALIST</i>	Entered into RBDMS <i>BS</i>
E-mail Address: <i>jcontreras@linnenergy.com</i>	Re-test
Date: <i>2/23/2016</i>	
Phone: <i>575/909-0031</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 14 2016