

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>30-025-21683</i>
Property Name <i>MESCALERO RIDGE UNIT</i>	Well No. <i>15</i>

7. Surface Location

UL - Lot <i>A</i>	Section <i>35</i>	Township <i>19S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet from <i>660</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR ☒ INJ	SWD	OIL	PRODUCER GAS	DATE <i>2/17/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>100</i>
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	Type of Mud Injected for Waterflood if applies.
Gas or Oil	Y/ ☒ N	Y/N	Y/N	Y/ ☒ N	
Water	Y/ ☒ N	Y/N	Y/N	Y/ ☒ N	

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>BS</i>
Title: <i>PROD. SPECIALIST</i>	Re-test
E-mail Address: <i>eccontreras@linnenergy.com</i>	
Date: <i>2/17/16</i>	Phone: <i>575/909-0031</i>
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

MAR 14 2016