

HOBBS

MAR 22 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>DCP Midstream</i>	API Number <i>30 025 385 76</i>
Property Name <i>Liam AGI</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>K</i>	Section <i>30</i>	Township <i>18</i>	Range <i>37</i>	Feet from <i>1980</i>	N/S Line <i>S</i>	Feet From <i>1980</i>	E/W Line <i>W</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>3-22-16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>3</i>		<i>5</i>		<i>3</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.

Signature: <i>Michael W. Selke</i>	OIL CONSERVATION DIVISION
Printed name: <i>Michael W. Selke</i>	Entered into RBDMS <i>BS</i>
Title: <i>Consultant to DCP Midstream LP</i>	Re-test
E-mail Address: <i>mselke@geolex.com</i>	
Date: <i>3-22-16</i>	Phone: <i>505-842-8000</i>
Witness: <i>Kristi Heady</i>	

MAR 30 2016