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

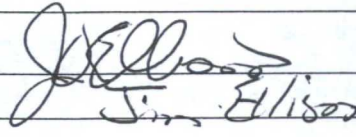
BRADENHEAD TEST REPORT

Operator Name <b>Apache Corp</b>						API Number <b>30-025-05908</b>			
Property Name <b>North Monument Geoprog San Andres Unit</b>						Well No. <b>03</b>			
Surface Location									
UL - Lot <b>C</b>	Section <b>5</b>	Township <b>20S</b>	Range <b>37E</b>	Feet from <b>1660</b>	N/S Line <b>N</b>	Feet From <b>1980</b>	E/W Line <b>W</b>	County <b>Lea</b>	
Well Status									
YES	TA'D WELL <b>NO</b>	YES	SHUT-IN <b>NO</b>	<b>INJ</b>	SWD	OIL	PRODUCER	GAS	DATE <b>3/23/16</b>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	$\emptyset$	$\emptyset$		$\emptyset$	1660
Flow Characteristics					
Puff	Y / <b>N</b>	Y / <b>N</b>	Y / N	<b>Y</b> / N	CO2 <input type="checkbox"/>
Steady Flow	Y / <b>N</b>	Y / <b>N</b>	Y / N	Y / <b>N</b>	WTR <input checked="" type="checkbox"/>
Surges	Y / <b>N</b>	Y / <b>N</b>	Y / N	Y / <b>N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Y</b> / N	<b>Y</b> / N	Y / N	<b>Y</b> / N	Type of Fluid
Gas or Oil	Y / <b>N</b>	Y / <b>N</b>	Y / N	Y / <b>N</b>	Injected for
Water	Y / <b>N</b>	Y / <b>N</b>	Y / N	Y / <b>N</b>	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: 		OIL CONSERVATION DIVISION	
Printed name: <b>Jim Ellison</b>		Entered into RBDMS <b>CF</b>	
Title:		Re-test	
E-mail Address:			
Date:	Phone: <b>575-441-7734</b>		
	Witness: <b>Craig Flowers</b>		

In C.F.

INSTRUCTIONS ON BACK OF THIS FORM

APR 04 2016