

JUN 06 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Saber Oil & Gas Ventures, LLC</i>	API Number <i>30-025-01983</i>
Property Name <i>Lea A state</i>	Well No. <i>#4</i>

7. Surface Location									
UL - Lot <i>E</i>	Section <i>8</i>	Township <i>17</i>	Range <i>34</i>		Feet from <i>1050</i>	N/S Line <i>N</i>	Feet From <i>330</i>	E/W Line <i>W</i>	County <i>Lea</i>

Well Status

TA'D WELL ☒ YES	☐ NO	SHUT-IN ☐ YES	☒ NO	INJECTOR ☐ INJ	SWD ☐ SWD	☒ OIL	PRODUCER ☐ GAS	DATE <i>5/9/16</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>20"</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
Gas or Oil	<i>Y / ☒ N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Injected for
Water	<i>Y / ☒ N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	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.

Valves on surface wont open

*In
guts*

Signature: <i>JD Machant</i>	OIL CONSERVATION DIVISION
Printed name: <i>JD Machant</i>	Entered into RBDMS
Title:	Re-test
E-mail Address: <i>JD E SABER OGV</i>	
Date: <i>5/31/16</i>	Phone:
Witness: <i>Carl Jones</i>	