

MAY 27 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Jegacy</i>	API Number <i>30 005 0108</i>
Property Name <i>West Cap Queen Sand Unit</i>	Well No. <i>5</i>

7. Surface Location

UL - Lot <i>1</i>	Section <i>17</i>	Township <i>14</i>	Range <i>31</i>	Feet from <i>1980</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	Count <i>chairs</i>
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Well-Status

TA'D WELL <i>YES</i>	<i>NO</i>	SHUT-IN <i>YES</i>	<i>NO</i>	INJECTOR <i>INJ</i>	SWD	OIL	PRODUCER GAS	DATE <i>5/17/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>φ</i>	<i>—</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <i>—</i>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <i>—</i>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <i>—</i>
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 applicable
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>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>A. G. Perry</i>	Entered into RBDMS
Title: <i>Field Supervisor</i>	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>5-17-16</i>	
Phone:	
Witness: <i>[Signature]</i>	