

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>Legacy</i>				API Number <i>3000501115</i>				
Property Name <i>West Cap Queen Sand UNG</i>				Well No. <i>18</i>				
1. Surface Location								
UL - Lot <i>D</i>	Section <i>21</i>	Township <i>14 S</i>	Range <i>31 E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet from <i>660</i>	E/W Line <i>W</i>	Count <i>chairs</i>
Well-Status								
YES	TA'D WELL <i>NO</i>	YES	SHUT-IN <i>NO</i>	INJ <i>INT</i>	SWD	OIL	PRODUCER GAS	DATE <i>5/17/16</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>Q</i>	<i>—</i>	<i>Q</i>	<i>Q</i>	<i>Q</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 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>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Aldo Pann</i>		Entered into RBDMS	
Title: <i>Field Supervisor</i>		Re-test <i>gmb</i>	
E-mail Address:			
Date: <i>5-17-16</i>	Phone:		
Witness: <i>Aldo Healy</i>			