

District I  
1625 N. French Dr., Hobbs, NM 88240  
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HOBBS OCD

JUL 25 2016

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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<br><i>Kaiser-Francis Oil Co.</i> |  | API Number<br><i>30-025-24771</i> |  |
| Property Name<br><i>North Bell Lake Unit 4</i> |  | Well No.<br><i>15</i>             |  |

|                    |                     |                        |                     |                          |                      |                          |                      |                      |  |
|--------------------|---------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|--|
| Surface Location   |                     |                        |                     |                          |                      |                          |                      |                      |  |
| UL Lot<br><i>A</i> | Section<br><i>8</i> | Township<br><i>23S</i> | Range<br><i>34E</i> | Feet from<br><i>1980</i> | N/S Line<br><i>S</i> | Feet from<br><i>1980</i> | E/W Line<br><i>W</i> | County<br><i>LCA</i> |  |

|             |                        |     |                      |     |                        |     |          |     |                        |
|-------------|------------------------|-----|----------------------|-----|------------------------|-----|----------|-----|------------------------|
| Well Status |                        |     |                      |     |                        |     |          |     |                        |
| YES         | TA'D WELL<br><i>NO</i> | YES | SHUT-IN<br><i>NO</i> | INJ | INJECTOR<br><i>SWD</i> | OIL | PRODUCER | GAS | DATE<br><i>7-12-16</i> |

OBSERVED DATA

|                      | (A) Surface | (B) Interm(1) | (C) Interm(2) | (D) Prod Csg | (E) Tubing                                                 |
|----------------------|-------------|---------------|---------------|--------------|------------------------------------------------------------|
| Pressure             | <i>0</i>    | <i>0</i>      | <i>—</i>      | <i>0</i>     | <i>1000</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>X</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<br>Injected for<br>Waterflood if<br>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>C. Van Valkenburg</i>   |                     | OIL CONSERVATION DIVISION |  |
| Printed name: Charlotte VanValkenburg |                     | Entered into RBDMS        |  |
| Title: Manager Regulatory Compliance  |                     | Re-test                   |  |
| E-mail Address: CharlotV@kfoc.net     |                     |                           |  |
| Date: <i>7/12/16</i>                  | Phone: 918-491-4314 |                           |  |
| Witness: <i>[Signature]</i>           |                     |                           |  |