

AUG 03 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <u>McGowan Working Partners Inc.</u>	API Number <u>30025284270000</u>
Property Name <u>Bridges State</u>	Well No. <u>186</u>

2. Surface Location

UL - Lot <u>A</u>	Section <u>35</u>	Township <u>17S</u>	Range <u>34E</u>	Feet from <u>1240</u>	N/S Line <u>4N</u>	Feet From <u>1210</u>	E/W Line <u>E</u>	County <u>LeA</u>
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Well Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☐ YES ☒ NO	INJECTOR ☒ INJ ☐ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <u>3/22/16</u>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<u>φ</u>	<u>N/A</u>	<u>N/A</u>	<u>φ</u>	<u>750</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>—</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>X</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>—</u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <u>Jack Stevenson</u>	OIL CONSERVATION DIVISION
Printed name: <u>JACK STEVENSON</u>	Entered into RBDMS
Title: <u>PUMPER</u>	Re-test
E-mail Address:	
Date: <u>3/22/16</u>	Phone: <u>575-631-1083</u>
Witness: <u>J. Brown</u>	