

HOBBS OCD

AUG 04 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <u>Legacy Reserves Operating L.P.</u>	API Number <u>3002510419</u>
Property Name <u>LMP5U</u>	Well No. <u>34</u>

2. Surface Location

UL - Lot <u>A</u>	Section <u>22</u>	Township <u>22S</u>	Range <u>37E</u>	Feet from <u>660</u>	N/S Line <u>N</u>	Feet From <u>660</u>	E/W Line <u>E</u>	County <u>Lea</u>
----------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL ☒ YES	☒ NO	SHUT-IN ☒ YES	☒ NO	INJ ☐	INJECTOR ☐	SWD ☐	☒ OIL	PRODUCER ☐	GAS ☐	DATE <u>7/18/16</u>
--	--	--	--	---------------------------------	--------------------------------------	---------------------------------	---	--------------------------------------	---------------------------------	------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>Q</u>	<u>Q</u>		<u>45</u>	<u>45</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>---</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
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	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.

A-B Gas

Signature: <u>Steven D. Thomas</u>	OIL CONSERVATION DIVISION
Printed name: <u>Steven D. Thomas</u>	Entered into RBDMS
Title: <u>Well Tech</u>	Re-test
E-mail Address:	
Date: <u>7/18/16</u>	
Phone:	
Witness:	