

HOBBS OCD

District 1  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

AUG 04 2016

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

RECEIVED

BRADENHEAD TEST REPORT

|                                                         |  |                                 |
|---------------------------------------------------------|--|---------------------------------|
| Operator Name<br><u>Legacy Reserves Operations L.P.</u> |  | API Number<br><u>3002531780</u> |
| Property Name<br><u>SJU</u>                             |  | Well No.<br><u>E-230</u>        |

Surface Location

|                    |                      |                        |                     |                         |                      |                         |                      |                      |
|--------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL Lot<br><u>0</u> | Section<br><u>25</u> | Township<br><u>25S</u> | Range<br><u>37E</u> | Feet from<br><u>890</u> | N/S Line<br><u>N</u> | Feet From<br><u>340</u> | E/W Line<br><u>W</u> | County<br><u>Lea</u> |
|--------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                                                   |                             |                                      |                             |                              |                              |                              |                                   |                              |                        |
|---------------------------------------------------|-----------------------------|--------------------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|-----------------------------------|------------------------------|------------------------|
| YES <input checked="" type="checkbox"/> TA'D WELL | NO <input type="checkbox"/> | YES <input type="checkbox"/> SHUT-IN | NO <input type="checkbox"/> | INJ <input type="checkbox"/> | SWD <input type="checkbox"/> | OIL <input type="checkbox"/> | PRODUCER <input type="checkbox"/> | GAS <input type="checkbox"/> | DATE<br><u>7/25/16</u> |
|---------------------------------------------------|-----------------------------|--------------------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|-----------------------------------|------------------------------|------------------------|

OBSERVED DATA

|                      | (A) Surface  | (B) Interm(1) | (C) Interm(2) | (D) Prod Casing | (E) Tubing                              |
|----------------------|--------------|---------------|---------------|-----------------|-----------------------------------------|
| Pressure             | <u>0</u>     |               |               | <u>0</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 <input checked="" type="checkbox"/> |
| 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.D. gas

|                                     |                            |
|-------------------------------------|----------------------------|
| Signature: <u>Steven Dittman</u>    | OIL CONSERVATION DIVISION  |
| Printed name: <u>Steven Dittman</u> | Entered into RBDMS         |
| Title: <u>Well Tech</u>             | Re-test <u>[Signature]</u> |
| E-mail Address:                     |                            |
| Date: <u>7/25/16</u>                | Phone:                     |
| Witness:                            |                            |