

AUG 15 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>New Mexico Salt Water Disposal</i>	API Number <i>30-025-20386</i>
Property Name <i>Whitten</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>I</i>	Section <i>14</i>	Township <i>20S</i>	Range <i>34E</i>	Feet from <i>1980</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR INJ ☒ SWD	PRODUCER OIL ☒ GAS	DATE <i>8/13/16</i>
--	--	--	--	------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>NA</i>	<i>NA</i>	<i>NA</i>	<i>0</i>	<i>VAC</i>
Flow Characteristics					<i>-20</i>
Puff	Y / N	Y / N	Y / N	☒ Y / N	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	☒ Y / N	WTR ☐
Surges	Y / N	Y / N	Y / N	☒ Y / N	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	☒ Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	☒ Y / N	Injected for
Water	Y / N	Y / N	Y / N	☒ Y / N	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.

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Theresa Soto</i>	Entered into RBDMS
Title: <i>lease operator</i>	Re-test
E-mail Address:	
Date: <i>8/10/16</i>	Phone:
Witness: <i>[Signature]</i>	