

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

BRADENHEAD TEST REPORT

HOBBES OGD

AUG 15 2016

RECEIVED

Operator Name <u>Legacy Reserves Operating LP</u>		API Number <u>30-00629162</u>
Property Name <u>Rock Queen Unit</u>		Well No. <u>704</u>

Surface Location

UL - Lot <u>Unit C</u>	Section <u>36</u>	Township <u>13S</u>	Range <u>31E</u>	Feet from <u>1309</u>	N/S Line <u>N</u>	Feet From <u>2629</u>	E/W Line <u>W</u>	County <u>Chaves</u>
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Well Status

TA'D WELL ☒ YES	NO	YES	SHUT-IN ☐ YES	NO	☒ INJ	INJECTOR ☐ SWD	OIL	PRODUCER ☐ GAS	DATE <u>8/31/16</u>
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OBSERVED DATA

	(A) Surface	(B) Interim(1)	(C) Interim(2)	(D) Prod Casing	(E) Tubing
Pressure	<u>0</u>	<u>N/A</u>	<u>N/A</u>	<u>0</u>	<u>0</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 Injected for Waterflood if applicable
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>Key D Guzman</u>		OIL CONSERVATION DIVISION	
Printed name: <u>Key D Guzman</u>		Entered into RBDMS	
Title: <u>lease operator</u>		Re-test	
E-mail Address:			
Date: <u>8-10-2016</u>	Phone:		
Witness:			