

SEP 01 2016

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Newbourn Oil Company</i>	API Number <i>30-025-2819</i>
Property Name <i>QP&ASU</i>	Well No. <i>13</i>

7. Surface Location

UL - Lot <i>N</i>	Section <i>22</i>	Township <i>18S</i>	Range <i>32E</i>	Feet from <i>330'</i>	N/S Line <i>S</i>	Feet From <i>2310'</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR <i>INT</i>	PRODUCER OIL	GAS	DATE <i>8/2/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0#</i>			<i>0#</i>	<i>1600#</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	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>Cade Carter</i>	Entered into RBDMS
Title: <i>Production Engineer</i>	Re-test
E-mail Address: <i>Carter@newbourn.com</i>	
Date: <i>8/2/16</i>	
Phone: <i>575-390-6158</i>	
Witness:	