

SEP 01 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Mowbray G.I. Company</i>		API Number <i>30-025-29770</i>	
Property Name <i>QPBSSA 3</i>		Well No. <i>#2</i>	

7. Surface Location

UL - Lot <i>5</i>	Section <i>23</i>	Township <i>18S</i>	Range <i>32E</i>	Feet from <i>2310</i>	N/S Line <i>S</i>	Feet From <i>2030</i>	E/W Line <i>E</i>	County <i>Lea</i>
----------------------	----------------------	------------------------	---------------------	--------------------------	----------------------	--------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <i>INI</i>	SWD	OIL PRODUCER	GAS	DATE <i>8/2/16</i>
------------------	----	----------------	----	------------------------	-----	--------------	-----	-----------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>OK</i>			<i>OK</i>	<i>500 H</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 Injected for Waterflood if applies.
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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>Carter @ mowbray.com</i>		Entered into RBDMS	
Title: <i>Production Engineer</i>		Re-test <i>[Signature]</i>	
E-mail Address: <i>Carter @ mowbray.com</i>			
Date: <i>8/2/16</i>	Phone: <i>575-390-6155</i>		
Witness:			