

HOBBS OCD

SEP 06 2016

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>MAS</i>	API Number <i>30-025-02494</i>
Property Name <i>P.V. Lynch & Fed</i>	Well No. <i>2</i>

1. Surface Location

U/Lot <i>P</i>	Section <i>34</i>	Township <i>20S</i>	Range <i>34E</i>	Feet from <i>660</i>	NS 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	INJ ☒ NO	INJECTOR ☒ SWD	OIL ☒ OIL	PRODUCER ☒ GAS	DATE <i>8/25/16</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>Ø</i>	<i>UAC</i>
Flow Characteristics					<i>-30</i>
Puff	Y / N	Y / N	Y / N	<i>(Y) N</i>	CO2 —
Steady Flow	Y / N	Y / N	Y / N	<i>Y / N</i>	WTR —
Surges	Y / N	Y / N	Y / N	<i>Y / N</i>	GAS —
Down to nothing	Y / N	Y / N	Y / N	<i>Y / N</i>	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	<i>Y / N</i>	Injected for
Water	Y / N	Y / N	Y / N	<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>Greg Holt</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>8/25/16</i>	
Phone:	
Witness: <i>[Signature]</i>	