

HOBBS OCD

SEP 14 2016

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

RECEIVED

BRADENHEAD TEST REPORT

|                                  |                                   |
|----------------------------------|-----------------------------------|
| Operator Name<br><b>Vanguard</b> | API Number<br><b>30-025-38294</b> |
| Property Name<br><b>BJ</b>       | Well No.<br><b>2</b>              |

7. Surface Location

|                    |                      |                       |                    |                         |                      |                         |                      |                      |
|--------------------|----------------------|-----------------------|--------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL Lot<br><b>P</b> | Section<br><b>17</b> | Township<br><b>22</b> | Range<br><b>37</b> | Feet from<br><b>990</b> | N/S Line<br><b>S</b> | Feet From<br><b>330</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|--------------------|----------------------|-----------------------|--------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                         |           |                       |           |                  |                       |                  |                        |                  |                        |
|-------------------------|-----------|-----------------------|-----------|------------------|-----------------------|------------------|------------------------|------------------|------------------------|
| TA'D WELL<br><b>YES</b> | <b>NO</b> | SHUT-IN<br><b>YES</b> | <b>NO</b> | INJ<br><b>NO</b> | INJECTOR<br><b>NO</b> | SWD<br><b>NO</b> | PRODUCER<br><b>OIL</b> | GAS<br><b>NO</b> | DATE<br><b>3/20/16</b> |
|-------------------------|-----------|-----------------------|-----------|------------------|-----------------------|------------------|------------------------|------------------|------------------------|

OBSERVED DATA

|                      | (A)Surface   | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg  | (E)Tubing     |
|----------------------|--------------|--------------|--------------|--------------|---------------|
| Pressure             | <b>100</b>   | <b>N/A</b>   | <b>N/A</b>   | <b>40</b>    | <b>100</b>    |
| Flow Characteristics |              |              |              |              |               |
| Puff                 | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | CO2 ___       |
| Steady Flow          | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | WTR ___       |
| Surges               | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | GAS ___       |
| Down to nothing      | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | Type of Fluid |
| Gas or Oil           | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | Injected for  |
| Water                | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | 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:                | OIL CONSERVATION DIVISION |
| Printed name: <b>J.T.</b> | Entered into RBDMS        |
| Title:                    | Re-test                   |
| E-mail Address:           | <b>JB</b>                 |
| Date:                     |                           |
| Phone:                    |                           |
| Witness:                  |                           |

INSTRUCTIONS ON BACK OF THIS FORM