

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

HOBBS OCD

MAR 23 2017

BRADENHEAD TEST REPORT

REC

Operator Name <i>Linn Operating</i>		API Number <i>30-025-09148</i>
Property Name <i>SEVEN RIVERS QUEEN UNIT</i>		Well No. <i>19</i>

Surface Location									
UL - Lot <i>A</i>	Section <i>34</i>	Township <i>22S</i>	Range <i>36E</i>		Feet from <i>660</i>	N/S Line <i>N</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 ☒	INJECTOR <i>INJ</i>	SWD	OIL PRODUCER GAS	DATE <i>3-23-17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>400</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>Paul Cowan</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Paul Cowan</i>		Entered into RBDMS	
Title:		Re-test <i>X</i>	
E-mail Address: <i>pcowan@linnenergy.com</i>			
Date: <i>3-23-17</i>	Phone: <i>575-631-4007</i>		
Witness: <i>Kerry Fortner - OCD</i> <i>399-3221</i>			

INSTRUCTIONS ON BACK OF THIS FORM