

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

HOBBS OCD

MAR 28 2017

BRADENHEAD TEST REPORT

Operator Name <i>Linn Operating</i>	API Number <i>30-025-11518</i>
Property Name <i>LANGLIE MATTEX QUEEN UNIT</i>	Well No. <i>7</i>

7. Surface Location									
UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County	
<i>P</i>	<i>10</i>	<i>25S</i>	<i>37E</i>	<i>990</i>	<i>S</i>	<i>990</i>	<i>E</i>	<i>Lea</i>	

Well Status							DATE
TA'D WELL	SHUT-IN	INJECTOR	SWD	OIL	GAS		
YES <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/>	OIL <input checked="" type="checkbox"/>	GAS <input type="checkbox"/>		<i>3-24-17</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgng	(E)Pabing
Pressure	<i>0</i>	<i>✓</i>	<i>—</i>	<i>0</i>	<i>20</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <input checked="" type="checkbox"/>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <input type="checkbox"/>
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>Paul Cowan</i>	Entered into RBDMS
Title:	Re-test
E-mail Address: <i>pcowan@linn.energy.com</i>	<i>X 2</i>
Date: <i>3-24-17</i>	
Phone: <i>575-631-4007</i>	
Witness: <i>Kerry Fortner - OCD</i>	

399-3221

INSTRUCTIONS ON BACK OF THIS FORM