

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 Operations</i>		API Number <i>30-025-23180</i>
Property Name <i>LANGLIE MATTEX QUEEN UNIT</i>		Well No. <i>22</i>

UL - Lot <i>N</i>	Section <i>15</i>	Township <i>25S</i>	Range <i>37E</i>	Feet from <i>668</i>	N/S Line <i>S</i>	Feet From <i>1633</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJECTOR ☒ INJ	SWD	PRODUCER OIL ☒ GAS	DATE <i>3-24-17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	CO2 ☐
Steady Flow	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	WTR ☒
Surges	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	GAS ☐
Down to nothing	<i>0</i> / N	Y / N	Y / N	<i>0</i> / N	Type of Fluid
Gas or Oil	Y / <i>N</i>	Y / N	Y / N	Y / <i>N</i>	Injected for
Water	Y / <i>N</i>	Y / N	Y / N	Y / <i>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>Paul Cowan</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>XZ</i>
Date: <i>3-24-17</i>	
Phone: <i>575-631-4007</i>	
Witness: <i>Kerry Fortner - OCD</i>	
<i>399-3221</i>	

INSTRUCTIONS ON BACK OF THIS FORM