

HOBBS OCD

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

MAR 28 2017

RECEIVED

BRADENHEAD TEST REPORT

|                                               |  |                                   |
|-----------------------------------------------|--|-----------------------------------|
| Operator Name<br><u>LINN OPERATING</u>        |  | API Number<br><u>30-025-01454</u> |
| Property Name<br><u>CAPROCK MALTAMAR UNIT</u> |  | Well No.<br><u>20</u>             |

| 7. Surface Location |                      |                        |                     |                          |                      |                          |                      |                      |  |
|---------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|--|
| UL Lot<br><u>K</u>  | Section<br><u>17</u> | Township<br><u>17S</u> | Range<br><u>33E</u> | Feet from<br><u>1980</u> | N/S Line<br><u>S</u> | Feet From<br><u>1980</u> | E/W Line<br><u>W</u> | County<br><u>Lea</u> |  |

| Well Status                                          |                                                    |                                                  |     |     |          |     |                        |
|------------------------------------------------------|----------------------------------------------------|--------------------------------------------------|-----|-----|----------|-----|------------------------|
| TA'D WELL<br>YES <input checked="" type="radio"/> NO | SHUT-IN<br>YES <input checked="" type="radio"/> NO | INJECTOR<br><input checked="" type="radio"/> INJ | SWD | OIL | PRODUCER | GAS | DATE<br><u>3-21-17</u> |

OBSERVED DATA

|                             | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                               |
|-----------------------------|------------|--------------|--------------|-------------|-----------------------------------------|
| Pressure                    | <u>0</u>   | <u>0</u>     | <u>/</u>     | <u>0</u>    | <u>2350</u>                             |
| <b>Flow Characteristics</b> |            |              |              |             |                                         |
| Puff                        | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | CO2 <input checked="" type="checkbox"/> |
| Steady Flow                 | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | WTR <input checked="" type="checkbox"/> |
| Surges                      | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | GAS <input type="checkbox"/>            |
| Down to nothing             | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | Type of Fluid                           |
| Gas or Oil                  | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | Injected for                            |
| Water                       | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | 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: <u>Eddie J. Jaramillo</u>              |                              | OIL CONSERVATION DIVISION |
| Printed name: <u>Eddie J. Jaramillo</u>           |                              | Entered into RBDMS        |
| Title: <u>PRODUCTION SPECIALIST</u>               |                              | Re-test <u>X</u>          |
| E-mail Address: <u>e.jaramillo@linnenergy.com</u> |                              |                           |
| Date: <u>3-21-17</u>                              | Phone: <u>(575) 370-9686</u> |                           |
| Witness: <u>Kerry Fortner - OCD</u>               |                              |                           |

399-3221

INSTRUCTIONS ON BACK OF THIS FORM