

HOBBS OCD

JUL 7 2017

RECEIVED

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

BRADENHEAD TEST REPORT

|                                        |                            |
|----------------------------------------|----------------------------|
| Operator Name<br>Mewbourne Oil Company | API Number<br>30-025-40162 |
| Property Name<br>Red Hills West SWD    | Well No.<br>1              |

7. Surface Location

|               |               |                 |              |                  |               |                  |               |               |
|---------------|---------------|-----------------|--------------|------------------|---------------|------------------|---------------|---------------|
| UL - Lot<br>P | Section<br>16 | Township<br>26S | Range<br>32E | Feet from<br>700 | N/S Line<br>S | Feet From<br>690 | E/W Line<br>E | County<br>Lea |
|---------------|---------------|-----------------|--------------|------------------|---------------|------------------|---------------|---------------|

Well Status

|                  |                              |                                |                     |                   |
|------------------|------------------------------|--------------------------------|---------------------|-------------------|
| TA'D Well<br>YES | SHUT-IN<br><del>NO</del> YES | INJECTOR<br>INJ <del>SWD</del> | PRODUCER<br>OIL GAS | DATE<br>5/18/2017 |
|------------------|------------------------------|--------------------------------|---------------------|-------------------|

OBSERVED DATA

|                      | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing          |
|----------------------|----------------|--------------|--------------|-------------|--------------------|
| Pressure             | 0              | —            | —            | 0           | 0                  |
| Flow Characteristics |                |              |              |             |                    |
| Puff                 | Y / N          | Y / N        | Y / N        | Y / N       | CO2 _____          |
| Steady Flow          | Y / N          | Y / N        | Y / N        | Y / N       | WTR _____          |
| Surges               | Y / N          | Y / N        | Y / N        | Y / N       | GAS _____          |
| Down to nothing      | Y / N          | Y / N        | Y / N        | Y / N       | If applicable type |
| Gas or Oil           | Y / N          | Y / N        | Y / N        | Y / N       | fluid injected for |
| Water                | Y / N          | Y / N        | Y / N        | Y / N       | Waterflood         |

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Pump not working

|                 |                           |
|-----------------|---------------------------|
| Signature:      | OIL CONSERVATION DIVISION |
| Printed name:   | Entered into RBDMS        |
| Title:          | Re-test                   |
| E-mail Address: |                           |
| Date:           | Phone:                    |
| Witness:        |                           |