

HOBBS OCD

JUL 17 2017 State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office
RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Burk Royalty Co</i>		API Number <i>30-025-02507</i>
Property Name <i>W. H. Milner Federal</i>		Well No. <i>004</i>

Surface Location

UL - Lot <i>C</i>	Section <i>35</i>	Township <i>20S</i>	Range <i>34E</i>	Feet from <i>990</i>	N/S Line <i>N</i>	Feet From <i>1650</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>7-11-17</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>VAC</i>
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	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	☒ Y / ☐ N	Injected for
Water	Y / N	Y / N	Y / N	☒ Y / ☐ N	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>Kirk Parker</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Kirk Parker</i>		Entered into RBDMS	
Title: <i>Field Superintendent</i>		Re-test <i>[Signature]</i>	
E-mail Address: <i>Kirk@burkroyalty.com</i>			
Date: <i>7-11-17</i>	Phone: <i>940-704-6680</i>		
Witness: <i>Guy Johnson - OCD</i>			
<i>575-399-3220</i>			

INSTRUCTIONS ON BACK OF THIS FORM