

HOBBS OCD

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

AUG 25 2017

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <b>EGL</b>	*API Number <b>30-025 00048</b>
Property Name <b>moore Devonian</b>	Well No. <b>3</b>

7. Surface Location

UL - Lot <b>I</b>	Section <b>14</b>	Township <b>11S</b>	Range <b>32E</b>	Feet from <b>1980</b>	N/S Line <b>S</b>	Feet From <b>660</b>	E/W Line <b>E</b>	County <b>Lea</b>
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Well Status

TA'D WELL <b>YES</b>	SHUT-IN <b>NO</b>	INJECTOR <b>NO</b>	PRODUCER <b>YES</b>	DATE <b>8/25/17</b>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>Ø</b>	<b>Ø</b>	<b>—</b>	<b>Ø</b>	<b>Ø</b>
Flow Characteristics					<b>WAC</b>
Puff	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>CO<sub>2</sub> —</b>
Steady Flow	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>WTR —</b>
Surges	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>GAS —</b>
Down to nothing	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	
Water	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	<b>Y / N</b>	

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

Signature: <b>[Signature]</b>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<b>[Signature]</b>
Date: <b>8/25/17</b>	Witness: <b>[Signature]</b>

INSTRUCTIONS ON BACK OF THIS FORM