

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

HOBBS OCD
AUG 30 2017
RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Armstrong Energy</i>	API Number <i>30-025-35962</i>
Property Name <i>Mobil LEA State</i>	Well No. <i>#008</i>

7. Surface Location

UL - Lot <i>N</i>	Section <i>2</i>	Township <i>20s</i>	Range <i>34e</i>	Feet from <i>330</i>	N/S Line <i>S</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>8-18-17</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>N/A</i>	<i>N/A</i>	<i>0</i>	<i>1130</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 Injected for Waterflood if applies.
Gas or Oil	☒ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☒ Y ☐ N	
Water	☒ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☒ Y ☐ N	

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

Signature: <i>Rocky Ray</i>	OIL CONSERVATION DIVISION
Printed name: <i>Rocky Ray</i>	Entered into RBDMS
Title: <i>FIELD OPERATIONS MANAGER</i>	Re-test <i>[Signature]</i>
E-mail Address:	
Date: <i>8-21-17</i>	Phone: <i>575 429-6371</i>
Witness: <i>Shay Kolenoski</i>	

389-3220

INSTRUCTIONS ON BACK OF THIS FORM