

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

BRADENHEAD TEST REPORT

Operator Name <u>Wishbone</u>	API Number <u>30-025-05204</u>
Property Name <u>W.T. Mann A</u>	Well No. <u>2</u>

2. Surface Location

UL Lot <u>B</u>	Section <u>36</u>	Township <u>14S</u>	Range <u>37E</u>	Feet from <u>660</u>	N/S Line <u>N</u>	Feet From <u>2310</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well Status

TA'D WELL ☒ YES	NO	SHUT-IN ☒ YES	NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <u>9/1/17</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>Ø</u>	<u>Ø</u>	<u>—</u>	<u>Ø</u>	<u>Ø</u>
Flow Characteristics	<u>Ø</u>	<u>Ø</u>	<u>—</u>	<u>Ø</u>	<u>Ø</u>
Pull	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u>—</u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u>—</u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u>—</u>
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>	Water used 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>Wayne Dixon</u>	OIL CONSERVATION DIVISION
Printed name: <u>WAYNE DIXON</u>	Entered into RBDMS
Title: <u>PRODUCTION FOREMAN</u>	Re-test
E-mail Address: <u>WDIXON@WISHBONEAP.COM</u>	
Date: <u>9/1/17</u>	
Phone: <u>432-556-5923</u>	
Witness: <u>J. Bower</u>	

INSTRUCTIONS ON BACK OF THIS FORM