

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

SEP 07 2017

RECEIVED

## BRADENHEAD TEST REPORT

|                                                      |                                   |
|------------------------------------------------------|-----------------------------------|
| Operator Name<br><i>Great Western Drilling</i>       | API Number<br><i>30-025-33542</i> |
| Property Name<br><i>South Carter San Andres Unit</i> | Well No.<br><i>703</i>            |

## 7. Surface Location

|                      |                     |                        |                     |                          |                      |                         |                      |                      |
|----------------------|---------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><i>m</i> | Section<br><i>5</i> | Township<br><i>18S</i> | Range<br><i>39E</i> | Feet from<br><i>1190</i> | N/S Line<br><i>S</i> | Feet From<br><i>990</i> | E/W Line<br><i>W</i> | County<br><i>Lea</i> |
|----------------------|---------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------|

## Well Status

|                                                                            |                                                                          |                                                                            |                                                                 |                        |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------|
| TA'D WELL<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | SHUT-IN<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | INJECTOR<br><input checked="" type="radio"/> INJ <input type="radio"/> SWD | PRODUCER<br>OIL <input type="radio"/> GAS <input type="radio"/> | DATE<br><i>8-31-17</i> |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------|

## OBSERVED DATA

|                      | (A) Surface <i>8 5/8</i> | (B) Interm(1) | (C) Interm(2) | (D) Prod Casing <i>5 1/2</i> | (E) Tubing                              |
|----------------------|--------------------------|---------------|---------------|------------------------------|-----------------------------------------|
| Pressure             | <i>0</i>                 | <i>N/A</i>    | <i>N/A</i>    | <i>0</i>                     | <i>0</i>                                |
| Flow Characteristics |                          |               |               |                              |                                         |
| Puff                 | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | CO2 <input type="checkbox"/>            |
| Steady Flow          | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | WTR <input checked="" type="checkbox"/> |
| Surges               | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | GAS <input type="checkbox"/>            |
| Down to nothing      | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | Type of Fluid                           |
| Gas or Oil           | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | Injected for                            |
| Water                | <i>Y/N</i>               | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>                   | 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.

*Pump was down*

|                                              |                           |
|----------------------------------------------|---------------------------|
| Signature:<br><i>Ralph Skinner Jr.</i>       | OIL CONSERVATION DIVISION |
| Printed name:<br><i>Ralph Skinner Jr.</i>    | Entered into RBDMS        |
| Title:<br><i>Production Supervisor</i>       | Re-test:                  |
| E-mail Address:<br><i>rskinner@gwddc.com</i> |                           |
| Date:<br><i>9-7-17</i>                       |                           |
| Phone:<br><i>575-942-1294</i>                |                           |
| Witness:<br><i>Gary Robinson</i>             |                           |