

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

BRADENHEAD TEST REPORT

Operator Name <i>Murchison</i>	API Number <i>30-025-41767</i>
Property Name <i>Jackson Unit</i>	Well No. <i>29 H</i>

7. Surface Location

UL - Lot <i>10</i>	Section <i>21</i>	Township <i>24S</i>	Range <i>33E</i>	Feet from <i>200</i>	N/S Line <i>5</i>	Feet From <i>1670</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL <i>YES</i>	NO	SHUT-IN <i>YES</i>	NO	INJ	SWD	PRODUCER <i>OIL</i>	GAS	DATE <i>9/29/17</i>
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10-5-17

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>None</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☐
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
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.

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Michael Huber</i>	Entered into RBDMS
Title: <i>Foreman</i>	Re-test <i>[Signature]</i>
E-mail Address:	
Date: <i>9/29/17</i>	Phone:
Witness: <i>[Signature]</i>	<i>575-393-3220</i>

INSTRUCTIONS ON BACK OF THIS FORM