

**HOBBS OCD**

**OCT 30 2017**

**RECEIVED**

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

**BRADENHEAD TEST REPORT**

|                                          |  |                                      |
|------------------------------------------|--|--------------------------------------|
| Operator Name<br><i>Sahara Operating</i> |  | *API Number<br><i>30-025-24908</i> ✓ |
| Property Name<br><i>W. E/ Mar</i>        |  | Well No.<br><i>#58</i> ✓             |

**7. Surface Location**

|                      |                      |                        |                     |                         |                      |                         |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><i>D</i> | Section<br><i>36</i> | Township<br><i>26S</i> | Range<br><i>32E</i> | Feet from<br><i>770</i> | N/S Line<br><i>N</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><input checked="" type="radio"/> YES <input type="radio"/> NO | SHUT-IN<br><input checked="" type="radio"/> YES <input type="radio"/> NO | INJECTOR<br><input checked="" type="radio"/> INJ <input type="radio"/> SWD | PRODUCER<br><input type="radio"/> OIL <input type="radio"/> GAS | DATE<br><i>8-29-17</i> |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------|

**OBSERVED DATA**

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csng | (E)Tubing     |
|----------------------|------------|--------------|--------------|--------------|---------------|
| Pressure             | <i>N/A</i> | <i>N/A</i>   | <i>N/A</i>   | <i>0</i>     | <i>None</i>   |
| Flow Characteristics |            |              |              |              |               |
| Puff                 | Y / N      | Y / N        | Y / N        | <i>Y / N</i> | CO2 ___       |
| Steady Flow          | Y / N      | Y / N        | Y / N        | <i>Y / N</i> | WTR ___       |
| Surges               | Y / N      | Y / N        | Y / N        | <i>Y / N</i> | GAS ___       |
| Down to nothing      | Y / N      | Y / N        | Y / N        | <i>Y / N</i> | Type of Fluid |
| Gas or Oil           | Y / N      | Y / N        | Y / N        | <i>Y / N</i> | Injected for  |
| Water                | Y / N      | Y / N        | Y / N        | <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>Robert W. Spivey</i>       |                       | Entered into RBDMS         |  |
| Title: <i>President</i>                     |                       | Re-test <i>[Signature]</i> |  |
| E-mail Address: <i>Rob@SAHARA OPER. com</i> |                       |                            |  |
| Date: <i>10-24-2017</i>                     | Phone: <i>[Blank]</i> |                            |  |
| Witness: <i>Gray Robinson</i>               |                       |                            |  |

INSTRUCTIONS ON BACK OF THIS FORM