

HOBBS OCD

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

NOV 08 2017

BRADENHEAD TEST REPORT

RECEIVED

Operator Name LEGACY RESERVES OPERATING LP	* API Number 30-025-09642
Property Name COOPER JAL UNIT	Well No. 148

7. Surface Location

UL - Lot J	Section 24	Township 24S	Range 36E	Feet from 2310	N/S Line S	Feet From 2310	E/W Line E	County LEA
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Well Status

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> IN <input type="radio"/> SWD	PRODUCER OIL <input type="radio"/> GAS	DATE 10/6/17
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	Q			N	535
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	Type of Fluid
Gas or Oil	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	Injected for
Water	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	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.

A gas

Signature: <i>Steve Dittman</i>	OIL CONSERVATION DIVISION
Printed name: STEVEN DITTMAN	Entered into RBDMS
Title: WELL TECH	Re-test X
E-mail Address: sdittman@legacylp.com	
Date: 10/6/17	
Phone: 432-312-4757	
Witness:	