

NOV 13 2017

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

RECEIVED

BRADENHEAD TEST REPORT

|                                                      |  |                                 |
|------------------------------------------------------|--|---------------------------------|
| Operator Name<br><u>Legacy Reserve Operations LP</u> |  | API Number<br><u>3002510620</u> |
| Property Name<br><u>SPAV</u>                         |  | Well No.<br><u>36</u>           |

2. Surface Location

|                      |                     |                        |                     |                         |                      |                         |                      |                      |
|----------------------|---------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><u>P</u> | Section<br><u>4</u> | Township<br><u>23S</u> | Range<br><u>37E</u> | Feet from<br><u>660</u> | N/S Line<br><u>S</u> | Feet From<br><u>660</u> | EAV Line<br><u>E</u> | County<br><u>Lea</u> |
|----------------------|---------------------|------------------------|---------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well-Status

|                                                      |                                        |     |                                                   |                                         |          |     |     |          |     |                        |
|------------------------------------------------------|----------------------------------------|-----|---------------------------------------------------|-----------------------------------------|----------|-----|-----|----------|-----|------------------------|
| TA'D WELL<br><input checked="" type="checkbox"/> YES | <input checked="" type="checkbox"/> NO | YES | SHUT-IN<br><input checked="" type="checkbox"/> NO | <input checked="" type="checkbox"/> INJ | INJECTOR | SWD | OIL | PRODUCER | GAS | DATE<br><u>11/7/17</u> |
|------------------------------------------------------|----------------------------------------|-----|---------------------------------------------------|-----------------------------------------|----------|-----|-----|----------|-----|------------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing                               |
|----------------------|------------|--------------|--------------|-------------|-----------------------------------------|
| Pressure             | <u>Q</u>   | <u>Q</u>     |              | <u>8</u>    | <u>160</u>                              |
| Flow Characteristics |            |              |              |             |                                         |
| Puff                 | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | CO2 <input checked="" type="checkbox"/> |
| Steady Flow          | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | WTR <input checked="" type="checkbox"/> |
| Surges               | <u>Y/N</u> | <u>Y/N</u>   | <u>Y/N</u>   | <u>Y/N</u>  | GAS <input checked="" type="checkbox"/> |
| 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>  | 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: <u>Steve Datin</u>    | OIL CONSERVATION DIVISION |
| Printed name: <u>Steve Datin</u> | Entered into RBDMS        |
| Title: <u>Prod. Foreman</u>      | Re-test                   |
| E-mail Address:                  |                           |
| Date: <u>11/7/17</u>             | Phone:                    |
|                                  | Witness:                  |