

HOBBS OCD

NOV 13 2017

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <u>Legacy Reserve Operating LP</u>		API Number <u>3002510625</u>
Property Name <u>SPAV</u>		Well No. <u>16</u>

² Surface Location

UL Lot <u>A</u>	Section <u>4</u>	Township <u>33S</u>	Range <u>37E</u>	Feet from <u>660</u>	N/S Line <u>W</u>	Feet from <u>660</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well-Status

TA'D WELL ☒ YES ☐ NO	SHUT-IN ☐ YES ☒ NO	INJ ☐ INJ ☐ SWD	PRODUCER ☒ OIL ☐ GAS	DATE <u>11/7/17</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>20</u>			<u>20</u>	
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 <u> </u>
Steady Flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR <u> </u>
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS <u> </u>
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	

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 D. Hays</u>	OIL CONSERVATION DIVISION
Printed name: <u>Steve D. Hays</u>	Entered into RBDMS
Title: <u>Prod Foreman</u>	Re-test <u> </u>
E-mail Address:	
Date: <u>11/7/17</u>	Phone: <u> </u>
Witness:	