

District I  
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Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

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><i>Legacy Reserves Operations LP</i> | API Number<br><i>3002510702</i> |
| Property Name<br><i>SFAV</i>                          | Well No.<br><i>43</i>           |

2. Surface Location

|                      |                      |                        |                     |                         |                      |                           |                      |                      |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|---------------------------|----------------------|----------------------|
| U.L. Lot<br><i>C</i> | Section<br><i>10</i> | Township<br><i>23S</i> | Range<br><i>37E</i> | Feet from<br><i>660</i> | N/S Line<br><i>N</i> | Feet From<br><i>19 ft</i> | E/W Line<br><i>W</i> | County<br><i>Lea</i> |
|----------------------|----------------------|------------------------|---------------------|-------------------------|----------------------|---------------------------|----------------------|----------------------|

Well Status

|                         |           |                       |           |     |     |            |                 |                        |
|-------------------------|-----------|-----------------------|-----------|-----|-----|------------|-----------------|------------------------|
| TA'D WELL<br><i>YES</i> | <i>NO</i> | SHUT-IN<br><i>YES</i> | <i>NO</i> | INJ | SWD | <i>OIL</i> | PRODUCER<br>GAS | DATE<br><i>11/7/17</i> |
|-------------------------|-----------|-----------------------|-----------|-----|-----|------------|-----------------|------------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing     |
|----------------------|------------|--------------|--------------|-------------|---------------|
| Pressure             | <i>45</i>  |              |              | <i>45</i>   | <i>45</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>Steve Datto</i>    | OIL CONSERVATION DIVISION |
| Printed name: <i>Steve Datto</i> | Entered into RBDMS        |
| Title: <i>Prod Foreman</i>       | Re-test                   |
| E-mail Address:                  |                           |
| Date: <i>11/7/17</i>             | Phone:                    |
| Witness:                         |                           |