

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

HOBBS OCD

NOV 13 2017

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <u>Rockcliff Operating</u>	API Number <u>30-025-31343</u>
Property Name <u>Fox A ST.</u>	Well No. <u>#5</u>

7. Surface Location

UL - Lot <u>F</u>	Section <u>2</u>	Township <u>9S</u>	Range <u>36E</u>	Feet from <u>2310</u>	N/S Line <u>N</u>	Feet From <u>2070</u>	E/W Line <u>W</u>	County <u>LEA</u>
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Well Status

TA'D WELL <u>YES</u>	SHUT-IN <u>NO</u>	INJECTOR <u>NO</u>	PRODUCER <u>YES</u>	GAS <u>NO</u>	DATE <u>10-19-17</u>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<u>5</u>	<u>N/A</u>	<u>N/A</u>	<u>0</u>	<u>20" V4C</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
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

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature <u>[Signature]</u>	OIL CONSERVATION DIVISION
Printed name: <u>JAMIE A ROBINSON</u>	Entered into RBDMS
Title: <u>SR. REG. ANALYST</u>	Re-test
E-mail Address: <u>JROBINSON@ROCKCLIFFENERGY.COM</u>	
Date: <u>11/13/17</u>	
Phone: <u>713-351-0534</u>	
Witness: <u>Larry Palmer</u>	

575-399-3220

INSTRUCTIONS ON BACK OF THIS FORM