

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 <i>Rockcliff Operating</i>	API Number <i>30-025-34703</i>
Property Name <i>EL Zorro Freemont Fed.</i>	Well No. <i>#2</i>

7. Surface Location

UL - Lot <i>6</i>	Section <i>1</i>	Township <i>9S</i>	Range <i>36E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet from <i>1350</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

PROD WELL ☒ YES ☐ NO	SHUT-IN ☒ YES ☐ NO	INJECTOR ☐ INJ ☒ SWD	PRODUCER ☐ OIL ☐ GAS	DATE <i>10-19-17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>5 gmb</i>	<i>0</i>
Flow Characteristics					
Pull	<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.

Well is disconnected

D - changed to 5 - in RBDMS

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>JAMIE ROBINSON</i>	Entered into RBDMS
Title: <i>SR. REG ANALYST</i>	Re-test
E-mail Address: <i>JROBINSON@ROCKCLIFFENERGY.COM</i>	
Date: <i>11/18/17</i>	
Phone: <i>719-351-8534</i>	
Witness: <i>Jamie Robinson</i>	

575-399-3220

INSTRUCTIONS ON BACK OF THIS FORM