

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 Reserves Operating LP</u>	API Number <u>3002510518</u>
Property Name <u>LMPJV</u>	Well No. <u>291</u>

2. Surface Location

UL - Lot <u>I</u>	Section <u>29</u>	Township <u>22S</u>	Range <u>37E</u>	Feet from <u>1650</u>	N/S Line <u>S</u>	Feet From <u>330</u>	E/W Line <u>E</u>	County <u>Lea</u>
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Well-Status

T.A'D WELL ☒ YES	☒ NO	SHUT-IN ☐ YES	☒ NO	INJ ☐ INJ	SWD ☐ SWD	☒ OIL	PRODUCER ☐ GAS	DATE <u>11/2/17</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>30</u>			<u>30</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>[Signature]</u>	OIL CONSERVATION DIVISION
Printed name: <u>Steve D. Hays</u>	Entered into RBDMS
Title: <u>Prod Foreman</u>	Re-test
E-mail Address:	
Date: <u>11/2/17</u>	Phone:
	Witness: