

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

HOBBS OCD

NOV 20 2017

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BRADENHEAD TEST REPORT

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

7. Surface Location

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

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <i>IN</i>	SWD <i>SWD</i>	OIL	PRODUCER 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>S</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>20" VHC</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

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

Need C-103 mailed to O&N 11-22-17

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

575-399-3220

INSTRUCTIONS ON BACK OF THIS FORM

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