

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

BRADENHEAD TEST REPORT

Operator Name <u>Linn Operating</u>	API Number <u>30-025-39785</u>
Property Name <u>Hale St.</u>	Well No. <u>4</u>

7. Surface Location

UL - Lot <u>D</u>	Section <u>31</u>	Township <u>17S</u>	Range <u>34E</u>	Feet from <u>330</u>	N/S Line <u>N</u>	Feet From <u>990</u>	E/W Line <u>W</u>	County <u>Lea</u>
----------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

TA'D WELL YES	<u>NO</u>	SHUT-IN YES	<u>NO</u>	INJ <u>NO</u>	INJECTOR <u>SWD</u>	OIL <u>NO</u>	PRODUCER <u>NO</u>	GAS <u>NO</u>	DATE <u>11/30/17</u>
------------------	-----------	----------------	-----------	------------------	------------------------	------------------	-----------------------	------------------	-------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>0</u>	<u>—</u>	<u>—</u>	<u>0</u>	<u>220</u>
Flow Characteristics					
Pull	<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
					applies

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

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<u>[Signature]</u>
Date: <u>11/30/17</u>	Phone: <u>[Signature]</u>
Witness: <u>[Signature]</u>	

INSTRUCTIONS ON BACK OF THIS FORM