

HOBBS OCD

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

MAR 01 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Enerrest Operating</i>		API Number <i>30-025-11863</i>	
Property Name <i>ARLOTT RAMSAY NCT-B</i>		Well No. <i>#3</i>	

Surface Location

UL - Lot <i>A</i>	Section <i>32</i>	Township <i>25S</i>	Range <i>37E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL <i>YES</i>	NO	SHUT-IN <i>YES</i>	NO	INJ	INJECTOR SWD	<i>OIL</i>	PRODUCER GAS	DATE <i>3-1-18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgg	(E)Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>0</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
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.

Signature: <i>William Pilkington</i>		OIL CONSERVATION DIVISION	
Printed name: <i>William Pilkington</i>		Entered into RBDMS	
Title:		Re-test <i>[Signature]</i>	
E-mail Address:			
Date:	Phone: <i>575-399-3220</i>		
Witness: <i>Greg Polson</i>			

INSTRUCTIONS ON BACK OF THIS FORM