State of New Mexico

Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT
Operator Name

MACK ENERGY CORP

3. API Number

30-025-39670-0000

| | | | | , | 7. Surface | Location | | | | |
|--|---------------|--------------|----------------|-----------|----------------|-------------------|----------|------------------|-------------------|--------------------|
| UL - Lot | Section | Township | Range | | | | Line | Feet From | E/W Line | County |
| F | 7 | 18-S | 35-E | | 157 | | I | 1855 | W | LEA |
| TASE | Well | | SHUT-IN | | Well S | | | PRODUCER | | DATE |
| | TA'D Well YES | | YES NO | | INJECTOR | | | | 3-762140 | |
| YES | (NE | Y | ES | XO | INJ | SWD | ØIL | S GAS | 7-7 | 7 |
| | | | \ | | OBSERVE | ED DATA | | | 2. 4 | / |
| | | (A)St | ırf-Interm | (B)Inte | erm(1) | (C)Inter | m(2) | (D)Pr | od Csng | (E)Tubing |
| ressure | | | 0 | | | | | | 50 | 50 |
| low Charac | teristics | | , | | | | | | | |
| Puff | | 7 | Y / (N) | | Y / N | | Y / N | | Y / N | CO2 |
| Steady F | low | | | | Y / N | | Y / N | | Y / N | WTR |
| Surge | s | \neg | Y / 🗑 | | Y / N | | Y / N | | Y / N | GAS |
| Down to no | othing | | W/N | | Y / N | | Y / N | | Y / N | If applicable type |
| Gas or 0 | Oil | | Y / N) | | Y / N | | Y / N | | Y / N | fluid injected for |
| Water | r | | YV | Y / | | | Y / N | | Y / N | Waterflood |
| temarks: Ple | ease state | for each str | ing (A,B,C,D,E |) pertine | ent informatio | n regarding bleed | d down o | or continuous bu | ild up if applies | |
| Remarks: Plo | ease state | for each str | ing (A,B,C,D,E |) pertine | ent informatio | n regarding bleed | d down o | or continuous bu | ild up if applies | • |
| iignature: | | for each str | ing (A,B,C,D,E |) pertine | ent informatio | n regarding bleed | | OIL CON | SERVATIO | ON DIVISION |
| ignature: 'rinted name: | | for each str | ing (A,B,C,D,E |) pertine | ent informatio | n regarding bleed | | OIL CON | SERVATIO | |
| Signature: Printed name: Sitle: | | for each str | ing (A,B,C,D,E |) pertine | ent informatio | n regarding bleed | | OIL CON | SERVATIO | |
| Signature: Printed name: Fitle: E-mail Addres | | for each str | |) pertine | ent informatio | n regarding bleed | | OIL CON | SERVATIO | |
| Signature: Printed name: Fitle: E-mail Addres | | for each str | Phone: | | | n regarding bleed | | OIL CON | SERVATIO | |