

HOBBS OCS
MAY 11 2018
RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <i>Legacy</i>		*API Number <i>30-025-28271</i>
Property Name <i>N.M. AE</i>		Well No. <i>26</i>

2. Surface Location

UL - Lot <i>E</i>	Section <i>12</i>	Township <i>18</i>	Range <i>34s</i>	Feet from <i>2080</i>	N/S Line <i>N</i>	Feet From <i>990</i>	E/W Line <i>N</i>	County <i>Lea</i>
----------------------	----------------------	-----------------------	---------------------	--------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

YES ☒ TA'D WELL	NO ☐ YES ☒ SHUT-IN	NO ☐ INJ	INJECTOR	SWD	OIL	PRODUCER GAS ☒	DATE <i>4/24/18</i>
---	--	---------------------------------	----------	-----	-----	---	------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>φ</i>	<i>—</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>
					CO2 ☐ WTR ☐ GAS ☐ Type of Fluid Injected for 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:		
Date: <i>4/24/18</i>	Phone:	
Witness: <i>J. Bower</i>		

INSTRUCTIONS ON BACK OF THIS FORM