

HOBBS OCD

MAY 22 2018

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## District 1

1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

## BRADENHEAD TEST REPORT

|                                            |  |                                        |  |
|--------------------------------------------|--|----------------------------------------|--|
| Operator Name<br><b>V-F PETROLEUM, INC</b> |  | API Number<br><b>30-025-40821-0000</b> |  |
| Property Name<br><b>HICKORY 14 STATE</b>   |  | Well No.<br><b>001</b>                 |  |

## 7. Surface Location

|                      |                      |                         |                      |                         |                      |                         |                      |                      |
|----------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><b>A</b> | Section<br><b>14</b> | Township<br><b>17-S</b> | Range<br><b>35-E</b> | Feet from<br><b>990</b> | N/S Line<br><b>N</b> | Feet From<br><b>990</b> | E/W Line<br><b>E</b> | County<br><b>LEA</b> |
|----------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

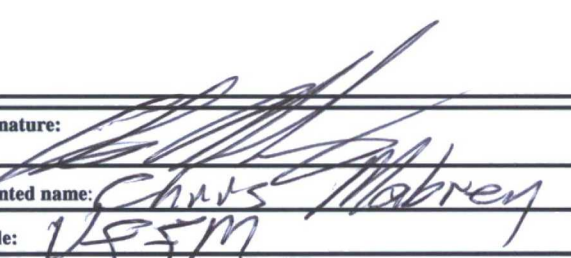
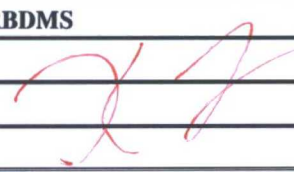
## Well Status

|                                   |                                 |                                   |                                   |                        |
|-----------------------------------|---------------------------------|-----------------------------------|-----------------------------------|------------------------|
| TA'D Well<br><b>YES</b> <b>NO</b> | SHUT-IN<br><b>YES</b> <b>NO</b> | INJECTOR<br><b>INJ</b> <b>SWD</b> | PRODUCER<br><b>OIL</b> <b>GAS</b> | DATE<br><b>5/21/18</b> |
|-----------------------------------|---------------------------------|-----------------------------------|-----------------------------------|------------------------|

## OBSERVED DATA

|                      | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg  | (E)Tubing          |
|----------------------|----------------|--------------|--------------|--------------|--------------------|
| Pressure             | <b>0</b>       | <b>0</b>     | <b>—</b>     | <b>6</b>     | <b>6</b>           |
| Flow Characteristics |                |              |              |              |                    |
| Puff                 | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | CO2 _____          |
| Steady Flow          | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | WTR _____          |
| Surges               | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | GAS _____          |
| Down to nothing      | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | If applicable type |
| Gas or Oil           | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | fluid injected for |
| Water                | <b>Y / N</b>   | <b>Y / N</b> | <b>Y / N</b> | <b>Y / N</b> | Waterflood         |

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: <b>Chris Mabrey</b>                                                              |        | Entered into RBDMS                                                                            |  |
| Title: <b>LFEM</b>                                                                             |        | Re-test  |  |
| E-mail Address:                                                                                |        |                                                                                               |  |
| Date: <b>5/21/18</b>                                                                           | Phone: |                                                                                               |  |
| Witness: <b>KERRY FORTNER-OCD 575-399-3221</b>                                                 |        |                                                                                               |  |