

AUG 14 2018

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

RECEIVED

BRADENHEAD TEST REPORT

| | | |
|---|--|--|
| Operator Name BREITBURN OPERATING, LP | | API Number 30-025-08643-0000 |
| Property Name CONE JALMAT YATES POOL UNIT | | Well No. 201 |

7. Surface Location

| UL - Lot | Section | Township | Range | Feet from | N/S Line | Feet From | E/W Line | County |
|----------|---------|----------|-------|-----------|----------|-----------|----------|--------|
| A | 24 | 22-S | 35-E | 660 | N | 660 | E | LEA |

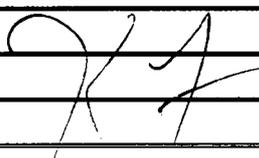
Well Status

| TA'D Well | SHUT-IN | INJECTOR | PRODUCER | DATE |
|---|---|---|---|---------|
| YES <input checked="" type="checkbox"/> | YES <input checked="" type="checkbox"/> | INJ <input checked="" type="checkbox"/> SWD | OIL <input checked="" type="checkbox"/> GAS | 8/13/18 |

OBSERVED DATA

| | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csmg | (E)Tubing |
|-----------------------------|----------------|--------------|--------------|--------------|---|
| Pressure | 0 | 0 | - | 0 | 900 |
| Flow Characteristics | | | | | |
| Puff | N | Y/N | Y/N | Y/N | CO2 _____ |
| Steady Flow | Y/N | Y/N | Y/N | Y/N | WTR <input checked="" type="checkbox"/> |
| Surges | Y/N | Y/N | Y/N | Y/N | GAS _____ |
| Down to nothing | N | N | Y/N | N | If applicable type |
| Gas or Oil | Y/N | Y/N | Y/N | Y/N | fluid injected for |
| Water | Y/N | Y/N | Y/N | Y/N | 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 Entered into RBDMS Re-test  |
| Printed name: | |
| Title: | |
| E-mail Address: | |
| Date: | |
| Phone: | |
| Witness: KERRY FORTNER-OCD 575-399-3221 | |