

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

HOBBS OCD

AUG 14 2018

BRADENHEAD TEST REPORT

RECEIVED

|                                                      |  |                                        |
|------------------------------------------------------|--|----------------------------------------|
| Operator Name<br><b>BREITBURN OPERATING, LP</b>      |  | API Number<br><b>30-025-08592-0000</b> |
| Property Name<br><b>JALMAT FIELD YATES SAND UNIT</b> |  | Well No.<br><b>122</b>                 |

7. Surface Location

|                      |                      |                         |                      |                         |                      |                         |                      |                      |
|----------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot<br><b>M</b> | Section<br><b>11</b> | Township<br><b>22-S</b> | Range<br><b>35-E</b> | Feet from<br><b>660</b> | N/S Line<br><b>S</b> | Feet From<br><b>990</b> | E/W Line<br><b>W</b> | County<br><b>LEA</b> |
|----------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                                                                            |                                                                          |                                                                            |                                                                 |                        |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------|
| TA'D Well<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | SHUT-IN<br>YES <input type="radio"/> NO <input checked="" type="radio"/> | INJECTOR<br><input checked="" type="radio"/> INJ <input type="radio"/> SWD | PRODUCER<br>OIL <input type="radio"/> GAS <input type="radio"/> | DATE<br><b>8/13/18</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>N/A</b>   | <b>0</b>    | <b>700</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:                                  |        | Entered into RBDMS        |
| Title:                                         |        | Re-test                   |
| E-mail Address:                                |        |                           |
| Date:                                          | Phone: |                           |
| Witness: <b>KERRY FORTNER-OCD 575-399-3221</b> |        |                           |