

AUG 13 2018

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Burgundy Oil + Gas</i>		API Number <i>30-025-02140</i>
Property Name <i>STATE VACUUM</i>		Well No. <i>#1</i>

1. Surface Location

W/L - Lot <i>m</i>	Section <i>29</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>680</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJ ☐	INJECTOR ☐	SWD ☐	OIL ☒	GAS ☐	DATE <i>6-29-18</i>
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OBSERVED DATA

	(A) Surface	(B) Intern(1)	(C) Intern(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>0</i>	<i>n/a</i>	<i>n/a</i>	<i>0</i>	<i>VAC</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☐
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	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: <i>Lindy Campbell</i>	OIL CONSERVATION DIVISION
Printed name: <i>Lindy Campbell</i>	Entered into RBDMS
Title: <i>Production Accountant</i>	Re-test <i>[Signature]</i>
E-mail Address: <i>ccampbell.bogi@att.net</i>	
Date: <i>6/29/18</i>	Phone: <i>437-684-4033, x-205</i>
Witness: <i>Larry Johnson</i>	

INSTRUCTIONS ON BACK OF THIS FORM