

AUG 13 2018

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

BRADENHEAD TEST REPORT

Operator Name <i>Burgundy Oil + Gas</i>		API Number <i>30-025-02176</i>	
Property Name <i>STATE VACUUM</i>		Well No. <i>#20</i>	

Surface Location									
UL - Lot <i>1P</i>	Section <i>32</i>	Township <i>17S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet from <i>660</i>	E/W Line <i>E</i>	County <i>LEA</i>	

Well Status						DATE
TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJ	INJECTOR SWD ☒	PRODUCER OIL ☒	GAS	<i>6-29-18</i>

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>40</i>	<i>50</i>
Flow Characteristics					
Pull	Y / N	Y / N	Y / N	Y / N	CO2 ☐
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ☐
Surges	Y / N	Y / N	Y / N	Y / N	GAS ☐
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	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>Candy Campbell</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Candy 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>438-684-4033, x-205</i>		
Witness: <i>Larry Robinson</i>			

INSTRUCTIONS ON BACK OF THIS FORM