

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

HOBBS OCD

AUG 20 2018

BRADENHEAD TEST REPORT

RECEIVED

|                                             |                            |
|---------------------------------------------|----------------------------|
| Operator Name<br>XTO Energy, Inc            | API Number<br>30-025-04589 |
| Property Name<br>Eunice Monument South Unit | Well No.<br>343            |

7. Surface Location

|               |               |                 |              |                  |                   |                  |                  |               |
|---------------|---------------|-----------------|--------------|------------------|-------------------|------------------|------------------|---------------|
| UL - Lot<br>M | Section<br>10 | Township<br>21S | Range<br>36E | Feet from<br>660 | N/S Line<br>South | Feet From<br>660 | E/W Line<br>West | County<br>Lea |
|---------------|---------------|-----------------|--------------|------------------|-------------------|------------------|------------------|---------------|

Well Status

|                  |                |                 |                 |     |                   |
|------------------|----------------|-----------------|-----------------|-----|-------------------|
| TA'D WELL<br>YES | SHUT-IN<br>YES | INJECTOR<br>INJ | PRODUCER<br>OIL | GAS | DATE<br>7-13-2018 |
|------------------|----------------|-----------------|-----------------|-----|-------------------|

OBSERVED DATA

|                      | (A) Surface                         | (B) Interm(1)                       | (C) Interm(2)                       | (D) Prod Casing                     | (E) Tubing                                                |
|----------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------------------------------|
| Pressure             | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>                       |
| Flow Characteristics |                                     |                                     |                                     |                                     |                                                           |
| Puff                 | Y/N                                 | Y/N                                 | Y/N                                 | Y/N                                 | CO2 <input type="checkbox"/>                              |
| 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 <input type="checkbox"/>                              |
| Down to nothing      | Y/N                                 | Y/N                                 | Y/N                                 | Y/N                                 | Type of Fluid<br>Injected for<br>Waterflood if<br>applies |
| Gas or Oil           | Y/N                                 | Y/N                                 | Y/N                                 | Y/N                                 |                                                           |
| Water                | Y/N                                 | Y/N                                 | Y/N                                 | Y/N                                 |                                                           |

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

|                               |                           |
|-------------------------------|---------------------------|
| Signature: <i>Alan Miller</i> | OIL CONSERVATION DIVISION |
| Printed name: ALAN MILLER     | Entered into RBDMS        |
| Title:                        | Re-test                   |
| E-mail Address:               |                           |
| Date: 7-13-2018               | Phone: 575-441-1641       |
| Witness:                      |                           |