

HOBBS OCD

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

AUG 29 2018

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>MAS</i>		API Number <i>30-025-02494</i>	
Property Name <i>BV Lynch A</i>		Well No. <i>2</i>	

7. Surface Location

1/4 Lot <i>9</i>	Section <i>34</i>	Township <i>20S</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>LCA</i>
---------------------	----------------------	------------------------	---------------------	-------------------------	----------------------	-------------------------	----------------------	----------------------

Well Status

YES ☒ TA'D WELL	NO ☒	YES ☒ SHUT-IN	NO ☒	INJ ☒ INJECTOR	SWD ☒	OIL ☒ PRODUCER	GAS ☒	DATE <i>7/23/18</i>
---	--	---	--	--	---	--	---	------------------------

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>N/A</i>	<i>-</i>	<i>-</i>	<i>Ø</i>	<i>VAC</i>
Flow Characteristics					<i>-3</i>
Puff	Y / N	Y / N	Y / N	<i>Ø</i> 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 Injected for Waterflood if 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>Greg NOIT</i>		OIL CONSERVATION DIVISION	
Printed name: <i>Greg NOIT</i>		Entered into RBDMS	
Title: <i>PUMPER</i>		Re-test	
E-mail Address: <i>MASoperating@att.net</i>			
Date: <i>7/23/18</i>	Phone: <i>432-618-0678</i>		
Witness: <i>Down</i>			