

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

BRADENHEAD TEST REPORT

Operator Name MIDLAND OPERATING		API Number 30-025-11180
Property Name BLACK		Well No. 1

7. Surface Location

1/4 - Lot J	Section 21	Township 24	Range 37	Feet from 1980	N/S Line S	Feet From 1980	E/W Line E	County LEA
----------------	---------------	----------------	-------------	-------------------	---------------	-------------------	---------------	---------------

Well Status

TA'D Well YES ☐ NO ☒	SHUT-IN YES ☐ NO ☒	INJECTOR INI ☒ SWD ☐	PRODUCER OIL ☐ GAS ☐	DATE 8/15/18
--	--	--	---	-----------------

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	Ø	Ø	—	Ø	250
Flow Characteristics					
Puff	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 ☐	If applicable type
Gas or Oil	Y/N ☐	Y/N ☐	Y/N ☐	Y/N ☐	fluid injected for
Water	Y/N ☐	Y/N ☐	Y/N ☐	Y/N ☐	Waterflood

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
-------	-------	-------	--------	-------

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

2 - months
Expired T/A

Signature: YOUR NAME <i>Billy Robbins</i>		OIL CONSERVATION DIVISION
Printed name: <i>Billy Robbins</i>		Entered into RBDMS
Title: <i>Lease Oper</i>		Re-test <i>[Signature]</i>
E-mail Address: <i>maximum@valornet.com</i>		
Date: ENTER DATE <i>8/15/18</i>	Phone: <i>575-390-4666</i>	
Witness: <i>[Signature]</i>		