

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

SEP 20 2018

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <b>DKD, LLC</b>		API Number <b>30-025-27884</b> ✓	
Property Name <b>Richardson FEE SWD</b>		Well No. <b>#2</b> ✓	

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<b>K</b>	<b>5</b>	<b>14S</b>	<b>36E</b>	<b>1980</b>	<b>S</b>	<b>1980</b>	<b>W</b>	<b>LEA</b> ✓

Well Status

TA'D WELL YES	<b>NO</b>	SHUT-IN YES	<b>NO</b>	INJECTOR INJ	<b>SWD</b>	PRODUCER OIL	GAS	DATE <b>9-20-18</b> ✓
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>N/A</b>	<b>N/A</b>	<b>0</b>	<b>90</b> ✓
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO2 <input type="checkbox"/>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR <input checked="" type="checkbox"/>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Type of Fluid
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Water flood 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: <b>James H. Ellis</b>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<b>JR</b>
Date:	
Phone:	
Witness: <b>Shay Robinson</b>	

INSTRUCTIONS ON BACK OF THIS FORM