

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

HOBBS OCD

OCT 10 2018

BRADENHEAD TEST REPORT

RECEIVED

|                                          |                                   |
|------------------------------------------|-----------------------------------|
| Operator Name<br><i>Armstrong Energy</i> | API Number<br><i>30-041-20938</i> |
| Property Name<br><i>Dora Dean 24</i>     | Well No.<br><i>#1</i>             |

Surface Location

|                      |                      |                       |                     |                         |                      |                          |                      |                            |
|----------------------|----------------------|-----------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------------|
| UL - Lot<br><i>B</i> | Section<br><i>24</i> | Township<br><i>5S</i> | Range<br><i>33E</i> | Feet from<br><i>990</i> | N/S Line<br><i>N</i> | Feet From<br><i>1700</i> | E/W Line<br><i>E</i> | County<br><i>Roosevelt</i> |
|----------------------|----------------------|-----------------------|---------------------|-------------------------|----------------------|--------------------------|----------------------|----------------------------|

Well Status

|                            |                          |                  |                        |                  |                       |                  |                        |
|----------------------------|--------------------------|------------------|------------------------|------------------|-----------------------|------------------|------------------------|
| TA'D WELL<br>YES <i>NO</i> | SHUT-IN<br>YES <i>NO</i> | INJ<br><i>NO</i> | INJECTOR<br><i>SWD</i> | OIL<br><i>NO</i> | PRODUCER<br><i>NO</i> | GAS<br><i>NO</i> | DATE<br><i>9-24-18</i> |
|----------------------------|--------------------------|------------------|------------------------|------------------|-----------------------|------------------|------------------------|

OBSERVED DATA

|                      | (A) Surface | (B) Interm(1) | (C) Interm(2) | (D) Prod Casing | (E) Tubing              |
|----------------------|-------------|---------------|---------------|-----------------|-------------------------|
| Pressure             | <i>600</i>  | <i>n/a</i>    | <i>n/a</i>    | <i>0</i>        | <i>0</i>                |
| Flow Characteristics |             |               |               |                 |                         |
| Pull                 | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | CO2 <i>—</i>            |
| Steady Flow          | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | WTR <i>✓</i>            |
| Surges               | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | GAS <i>—</i>            |
| Down to nothing      | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | Type of fluid <i>—</i>  |
| Gas or Oil           | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | Injected for <i>—</i>   |
| Water                | <i>Y/N</i>  | <i>Y/N</i>    | <i>Y/N</i>    | <i>Y/N</i>      | Water level if <i>—</i> |

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

*Surf. casing blew to zero in 8min then needle valve.*

|                                    |                           |
|------------------------------------|---------------------------|
| Signature: <i>Ryan Donnelly</i>    | OIL CONSERVATION DIVISION |
| Printed name: <i>Ryan Donnelly</i> | Entered into RBDMS        |
| Title:                             | Re-test <i>MD</i>         |
| E-mail Address:                    |                           |
| Date:                              |                           |
| Phone:                             |                           |
| Witness: <i>Gary Robinson</i>      |                           |

INSTRUCTIONS ON BACK OF THIS FORM