

MAR 01 2019

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

BRADENHEAD TEST REPORT

Operator Name <i>Burk Royalty</i>	API Number <i>30-025-02501</i>
Property Name <i>NEAL</i>	Well No. <i>#3</i>

Surface Location

UL - Lot <i>A</i>	Section <i>35</i>	Township <i>20S</i>	Range <i>34E</i>	Feet from <i>330</i>	N/S Line <i>N</i>	Feet From <i>993</i>	E/W Line <i>E</i>	County <i>LEA</i>
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Well Status

TA'D WELL YES ☒ NO	SHUT-IN YES ☒ NO	INJ ☒ SWD	PRODUCER OIL ☒ GAS	DATE <i>3-1-19</i>
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>0</i>	<i>N/A</i>	<i>N/A</i>	<i>0</i>	<i>100</i>
Flow Characteristics					
Pull	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☒
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☒
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☒
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of fluid injected for waterflood if applies
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

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

Signature: <i>Kurt Parker</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS <i>HR</i>
Title:	Re-test
E-mail Address:	
Date:	Phone:
Witness: <i>Shay Anderson</i>	

INSTRUCTIONS ON BACK OF THIS FORM