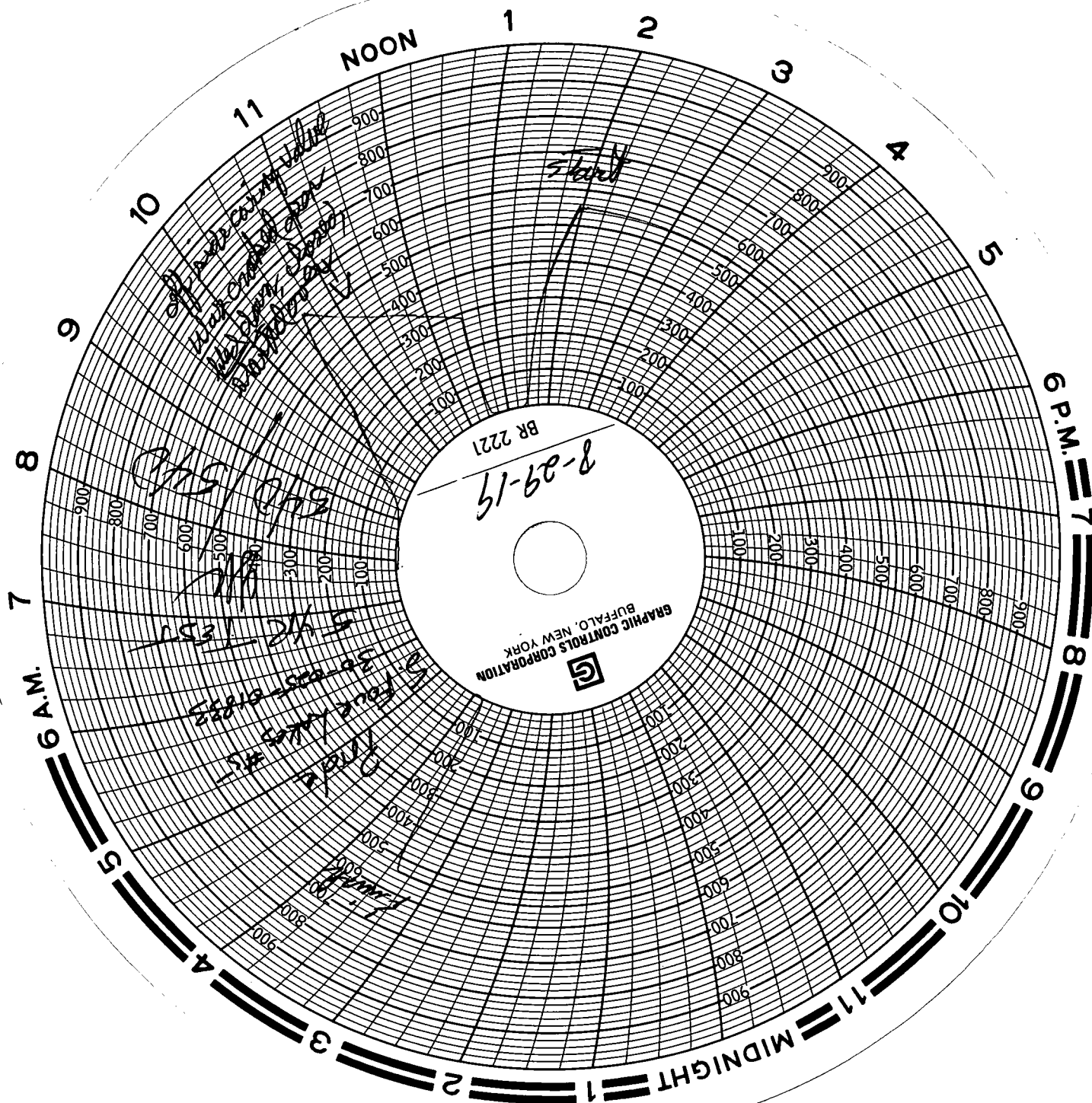




State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

HOBBS OCD

JAN 06 2020

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Pride Energy</i>	API Number
Property Name <i>South 4 Lakes</i>	Well No <i>8</i>

1. Surface Location

UL - Lot <i>NENE</i>	Section <i>2</i>	Township <i>12S</i>	Range <i>34E</i>	Feet from	NS Line	Feet from	E/W Line	County
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR INT	PRODUCER GAS	DATE <i>8-29-19</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Cmg	(E)Tubing
Pressure					
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 WTR ☒ GAS ☐ Type of fluid Inferred for Waterflood if applies
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
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>Clayton Ferguson</i>	OIL CONSERVATION DIVISION
Printed name <i>Clayton Ferguson</i>	Entered into RBDMS
Title <i>Pumper</i>	Re-test
E-mail Address:	
Date:	
Phone <i>575-760-0640</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM