

RAILROAD COMMISSION OF TEXAS

Oil and Gas Division

Disposal/Injection Well Pressure Test Report

UIC CONTROL NO.

Type _____

FOR RRC USE ONLY

READ INSTRUCTIONS ON BACK

PLEASE TYPE OR PRINT

1. OPERATOR'S NAME <u>Endeavor Energy Resources, LP</u>				2. RRC OPERATOR NO. <u>251726</u>			
3. ADDRESS <u>110 N Marienfeld, Ste. 200 Midland, TX 79701</u>				4. RRC DISTRICT NO. <u>7C</u>		5. COUNTY <u>REAGAN</u>	
6. FIELD NAME (Exactly as shown on proration schedule) <u>SPRABERRY (TREND AREA)</u>			7. FIELD NO. <u>85279200</u>		8. API NO. <u>42-383-</u>		
9. LEASE NAME <u>UNIVERSITY "13-2"</u>			10a. OIL LEASE NO. <u>10800</u>		10b. GAS ID NO.	11. WELL NO. <u>1W</u>	
12. REASON FOR TEST <input type="checkbox"/> Initial Test Prior to Injection <input type="checkbox"/> After Workover <input checked="" type="checkbox"/> Annual Test Required By Permit <input type="checkbox"/> Five-Year Test Required By Rule <input type="checkbox"/> Other (Specify) _____			13. DATE OF TEST <u>04/25/2008</u>		14. RETEST? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <small>If YES, see Instruction No. 5</small>		
			15. WELL COMPLETION		size	depth set	
			Surface Casing		<u>8 5/8</u>	<u>630</u>	
			Long String Casing		<u>5 1/2</u>	<u>3075</u>	
Tubing		<u>2 3/8</u>	<u>3050</u>				
16a. PACKER MAKE AND MODEL <u>Baker AD -1</u>			16b. DEPTH SET <u>3050</u>				
17. AUTHORIZED INJECTION PRESSURE (PSIG): <u>200</u>							
18a. PERMITTED INJECTION INTERVAL Top <u>3075</u> Bottom <u>3700</u>			18b. COMPLETED INJECTION INTERVAL Top <u>3075</u> Bottom <u>3195</u>				
19. TEST PRESSURE (PSIG) [see Instructions 4(c) and 4(d)]							
TIME		TUBING		CASING		SURFACE CSG.	
Initial		<u>0</u>		<u>465</u>		<u>0</u>	
15 min.		<u>0</u>		<u>465</u>		<u>0</u>	
30 min.		<u>0</u>		<u>465</u>		<u>0</u>	
20. CHARACTERISTICS OF INJECTION FLUID [see Instruction 4(e)] <u>Produced water</u>							
21. CHARACTERISTICS OF ANNULUS FLUID [see Instructions 4 (e) and 4 (f)] <u>Packer fluid</u>							
22. TEST WITNESSED BY RRC? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If NO, see Instruction 4(a) If YES, Name of RRC Representative _____				23. WERE OTHER TESTS/SURVEYS PERFORMED AT THIS TIME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If YES, List:			
24. OPERATOR COMMENTS ON TEST (attach separate sheet if necessary)							
25. WELL STATUS: <input checked="" type="checkbox"/> Active <input type="checkbox"/> Temporarily Abandoned <input type="checkbox"/> Other (Specify) _____							

CERTIFICATE:

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that data and facts stated herein are true, correct, and complete, to the best of my knowledge.

Cheri Prince

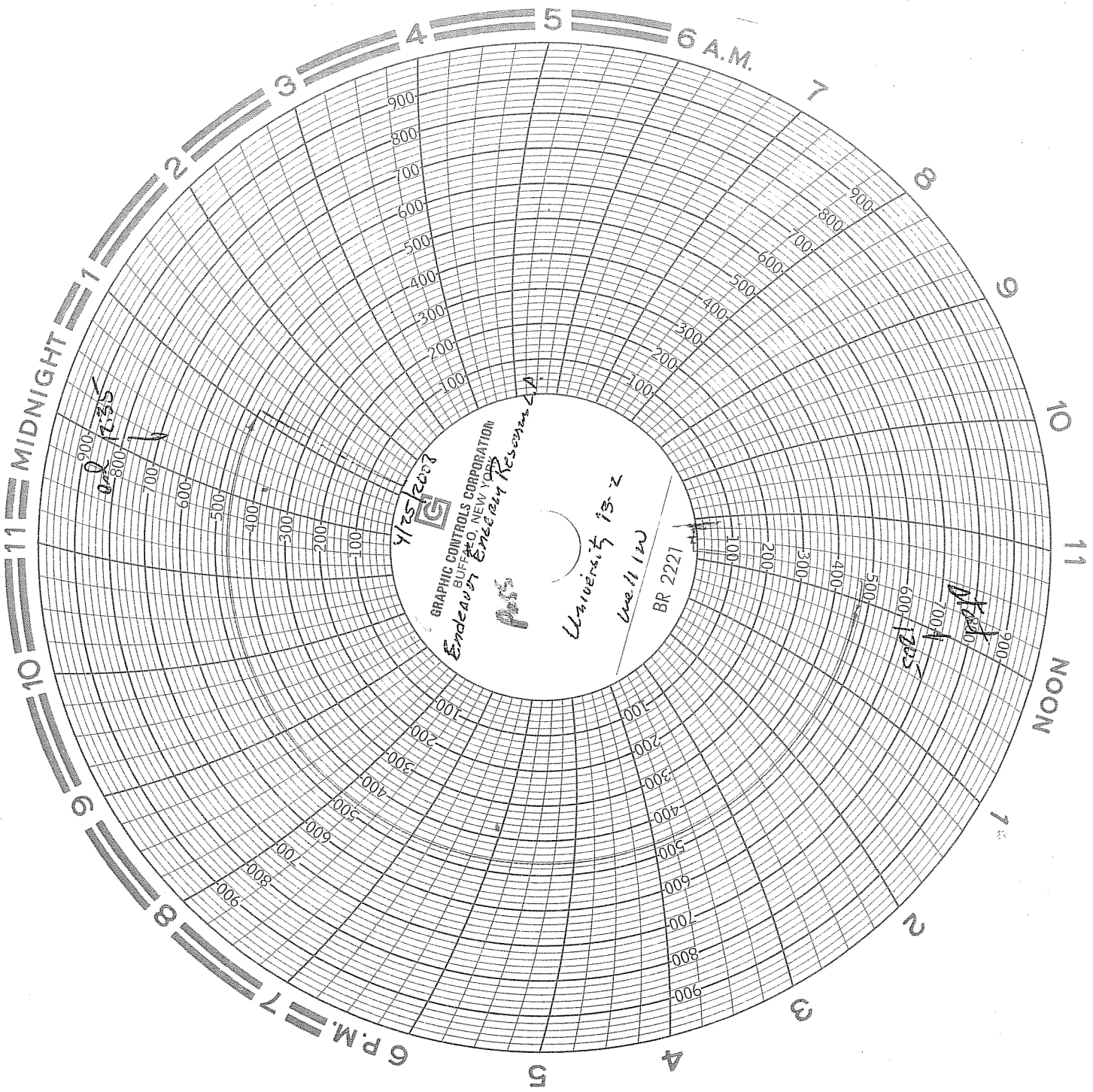
Signature

Cheri Prince
Name of Person (type or print)

Production Admin.
Title

Telephone No. (432) 687-1575

Date 05/05/2008



GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK
Energy Reserve

University B-2
Well W

BR 2221

4/25/2008

1000

600

1200

900

800

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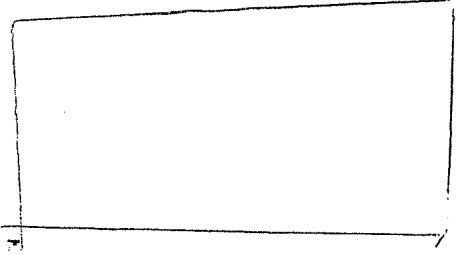
1000

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	Tb6	C36	Surf
Initial	0	465	0
15	0	465	0
30	0	465	0

RRC Job # 2008-4080
Passed Bm =
4/25/2008