

NEW MEXICO ENERGY, MINERALS & NATURAL RESOURCES DEPARTMENT

NORTHWEST NEW MEXICO PACKER -LEAKAGE TEST

Operator Conoco Lease Name _____ State Com AJ Well No. 34E

Location of Well: Unit Letter _____
Location of well API # 30-0 _____

N Sec. 36 Twp. 32N Range 12W
452374500

	NAME OF RESERVOIR OR POOL	TYPE OF PROD. (Oil or Gas)	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. Or Csg)
Upper Completion	Glade Fruitland Sand	Gas	Flow	Tbg.
Lower Completion	Basin Dakota	Gas	Art. Lift-Plunger	Tbg.

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Completion	Hour shut-in	Date shut-in	Instant SI Pressure	SI press. Psig	Stabilized? (Yes or No)
	11:00 AM	11/11/2002			
Lower Completion	Hour shut-in	Date shut-in	Instant SI Pressure	SI press. Psig	Stabilized? (Yes or No)
	11:00AM	11/11/2002			

FLOW TEST NO. 1

Commenced at (hour, date)		1:00 PM	11/14/2002	Zone producing (upper or lower)	lower zone
TIME Date	LAPSED TIME SINCE*	PRESSURE		Remarks	
		Upper	Lower		
11/11/2002	1 day	150	167	both zones shut in	
11/12/2002	2 day	152	170	both zones shut in	
11/13/2002	3 day	156	174	both zones shut in	
11/14/2002	4 day	159	174	Turned lower zone on	
11/15/2002	5 day	140	82	checked psi one hour into afterflow.	

Production rate during test

Oil		BOPD based on		Bbls.in		Hours		Grav.		GOR
Gas		MCFPD; Tested thru (Orifice or Meter):								

MID-TEST SHUT-IN PRESSURE DATA

Upper Completion	Hour	Date	Instant SI Pressure	SI press. Psig	Stabilized? (Yes or No)
Lower Completion	Hour	Date	Instant SI Pressure	SI press. Psig	Stabilized? (Yes or No)

FLOW TEST NO. 2

Commenced at (hour, date)				Zone producing (upper or lower)	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE		Remarks	
		Upper	Lower		

Production rate during test

Oil		BOPD based on		Bbls.in		Hours		Grav.		GOR
Gas		MCFPD; Tested thru (Orifice or Meter):								

Remarks

I hereby certify that the information herein contained is true and complete to the best of my knowledge.

Approved _____ Date _____
New Mexico Oil Conservation Division

Operator Conoco
By Gary Vaughn

By FAILED Date _____
Title _____

Title MSO
Date 11/15/02