

NEW MEXICO OIL CONSERVATION DIVISION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator ARMSTRONG ENERGY Well API # 30-005-60925
Location Of Well: Unit M Section 134 Township 8 S Range 27 E County CHAVES
Well Name & No. Campbell St. Unit 1

	Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. (Flow Art. Lift)	Prod. Medium (Tbg. Or Cag.)	Choke Size
Upper Completion	<u>ABO</u>	<u>GAS</u>	<u>Flow</u>	<u>CSG</u>	<u>open</u>
Lower Completion	<u>PENN.</u>	<u>GAS</u>	<u>Flow</u>	<u>TBG.</u>	<u>open</u>

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FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:45 AM 10-7-13

Well opened at (hour, date): 11:45 AM 10-7-13

Indicate by (X) the zone producing.....	<u>X</u>	Upper Completion
Pressure at beginning of test.....	<u>120</u>	<u>200</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>120</u>	<u>245</u>
Minimum pressure during test.....	<u>100</u>	<u>200</u>
Pressure at conclusion of test.....	<u>100</u>	<u>245</u>
Pressure change during test (Maximum minus Minimum).....	<u>20</u>	<u>45</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>INCREASE</u>

Well closed at (hour, date): 10:00 AM 10-8-13 Total Time On Production 21.75 HRS

Oil Production 0 bbls; Grav. _____ Gas Production 14 MCF; GOR _____

During Test: _____ ; During Test _____

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FLOW TEST NO. 2

Both zones shut-in at (hour, date): 10:00 AM 10-8-13

Well opened at (hour, date): 10:15 AM 10-8-13

Indicate by (X) the zone producing.....		Upper Completion
Pressure at beginning of test.....	<u>115</u>	<u>250</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>145</u>	<u>250</u>
Minimum pressure during test.....	<u>115</u>	<u>130</u>
Pressure at conclusion of test.....	<u>145</u>	<u>130</u>
Pressure change during test (Maximum minus Minimum).....	<u>30</u>	<u>120</u>
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>DECREASE</u>

Well closed at (hour, date): 5:15 pm 10-8-13 Total Time On Production 7 Hours

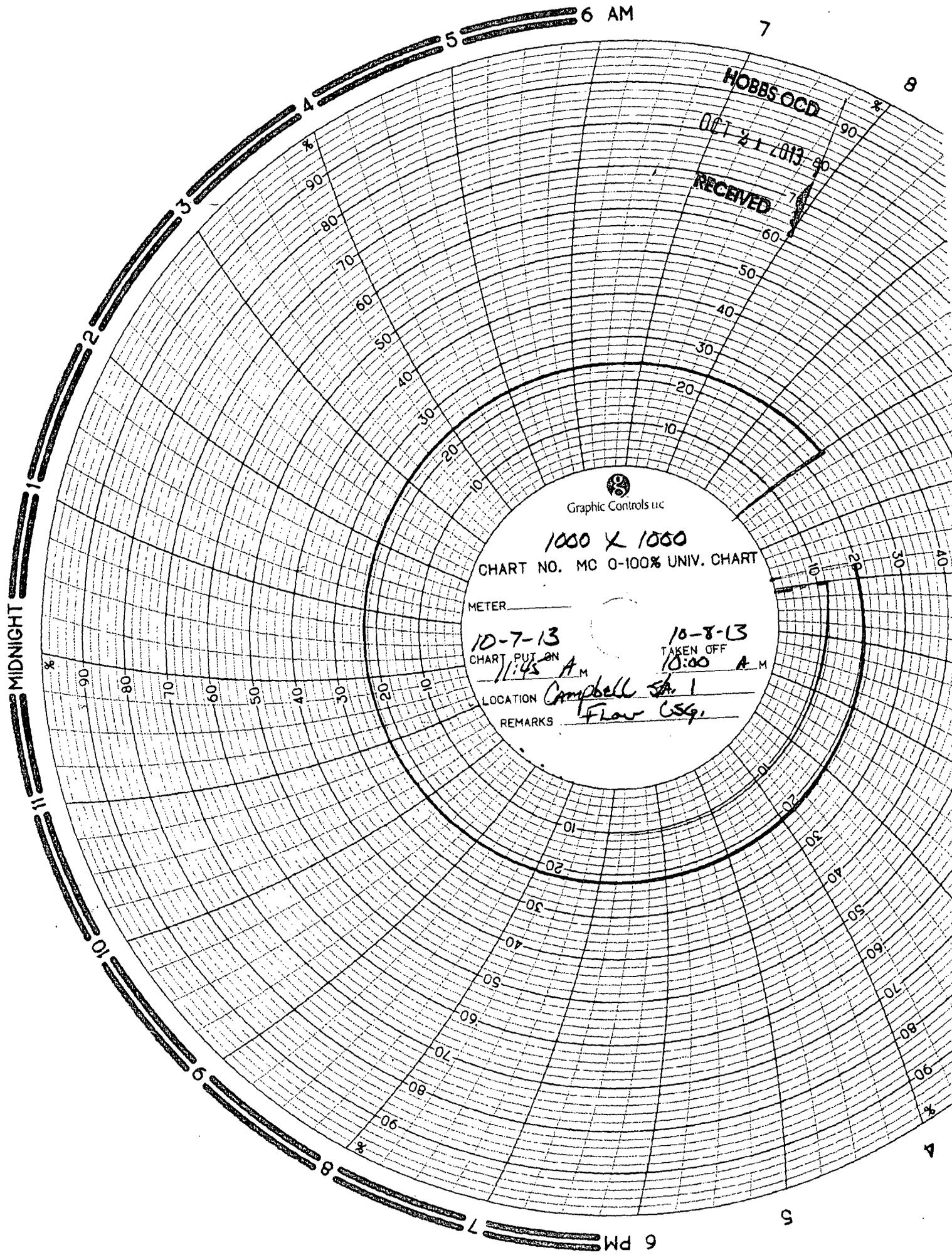
Oil Production 0 bbls; Grav. _____ Gas Production 5 MCF; GOR _____

During Test: _____ ; During Test _____

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

Approved _____ 20 _____ Operator ARMSTRONG ENERGY
New Mexico Oil Conservation Division
By Jeff Deck
Title MEASUREMENT TECH II
E-mail Address jdeck@guestoffice.net
Date 10-8-2013

Accepted for record
By _____ Title _____
By _____ Title _____



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OCT 21 2013

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Graphic Controls Inc

1000 X 1000

CHART NO. MC 0-100% UNIV. CHART

METER

10-7-13
CHART PUT ON
11:45 A.M.

10-8-13
TAKEN OFF
10:00 A.M.

LOCATION Campbell Sta. 1

REMARKS Flow CS9.

MIDNIGHT

6 AM

7

8

10

9

8

7

6 PM

5

4

MIDNIGHT 1 2 3 4 5 6 AM 7

Graphic Controls Inc

CHART NO. 1000 X 1000
MC 0-100% UNIV. CHART

10-8-13
CHART PUT ON
10:15 AM

10-8-13
TAKEN OFF
5:15 PM

LOCATION Campbell Sta #1
REMARKS Flaw Tbg.

RECEIVED
10-9-13
HOBBS OCB