

OIL CONSERVATION DIVISION

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST FOR 1998

Operator Caulkins Oil Company Lease BREECH "E" Well No. 64-M

Location
of Well: Unit J Sec. 1 Twp. 26N Rge. 6W County Rio Arriba

	NAME OF RESERVOIR OR POOL	TYPE OF PROD.	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. or Csg.)
Upper Compl.	MESA VERDE	Gas	Flow	Tubing
Lower Comp.	BASIN DAKOTA	Gas	Flow	Tubing

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stablized?(Yes or No)
Lower Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stablized?(Yes or No)

FLOW TEST NO. 1

Commenced at (hour, date)* 9:10 AM 1-17-99				Zone producing (Upper or Lower):	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE Upper Comp. Lower Comp.		PROD. ZONE TEMP.	REMARKS
9:10 AM 1-18-99	24 hrs.	271	388	60	Both Zones Shut-In
9:10 AM 1-19-99	48 hrs.	279	403	60	Both Zones Shut-In
9:10 AM 1-20-99	72 hrs.	283	412	60	Both Zones Shut-In
9:10 AM 1-21-99	96 hrs.	285	271	60	Lower Zone Producing
9:10 AM 1-22-99	120 hrs.	287	243	60	Lower Zone Producing

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 Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stablized?(Yes or No)
Lower Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stablized?(Yes or No)

(Continue on reverse side)

FLOW TEST NO. 2

Commenced at (hour, date)*				Zone producing (Upper or Lower):	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE Upper Comp. Lower Comp.		PROD. ZONE TEMP.	REMARKS

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.

Approval _____ 19 _____

New Mexico Oil Conservation Division

Operator _____ Caulkins Oil Company

By Robert L. Vergara

By _____

Title _____ Superintendent

Title DEPUTY OIL & GAS INSPECTOR, DIST. #1

Date _____ February 8, 1999

NOTE: This format is in lieu of Oil Conservation Division, Packer Leakage Tests Form.