

**NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT**

NORTHWEST NEW MEXICO PACKER -LEAKAGE TEST

Operator Conoco Lease Name _____ State Com Q _____ Well No. 13A

Location of Well: Unit Letter J Sec. 36 Twp. 29 Range 8
Location of well API # 30-0 300452258600

	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	PC	Gas	Flow	TBG
Lower Completion	MV	Gas	Flow	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)
	9:20 AM	5/13/2002	10 minutes	135	yes
Lower Completion	Hour shut-in	Date shut-in	Instant SI Pressure	SI press. Psig	Stabilized? (Yes or No)
	9:20 AM	5/13/2002	10 minutes	225	yes

FLOW TEST NO. 1

Commenced at (hour, date)		9:00 AM	5/14/2002	Zone producing (upper or lower)		Lower
TIME Date	LAPSED TIME SINCE*	PRESSURE		Remarks		
		Upper	Lower			
5/14/2002	Day 1	209	315	Both zones shut-in		
5/15/2002	Day 2	217	318	Opened MV		
5/16/2002	Day 3	225	182	OK		

Production rate during test

Oil	0	BOPD based on	X	Bbls.in	Hours	Grav.	GOR
Gas	151	MCFPD; Tested thru (Orifice or Meter):		Meter			

MID-TEST SHUT-IN PRESSURE DATA

Upper Completion	Hour	Date	Length of time shut-in	SI press. Psig	Stabilized? (Yes or No)
Lower Completion	Hour	Date	Length of time shut-in	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 _____ Operator Conoco
New Mexico Oil Conservation Division By Donald Blair
By _____ Date _____ Title FPS
Title _____ Date 5/20/02