

CHEVRON U.S.A. INC.

DISPOSAL/INJECTION WELL
PRESSURE TEST REPORT
NEW MEXICO

1. LEASE NAME: J.F. Janda NCT-F
2. WELL NO: 6
3. LOCATION: UNIT D SEC 4 T 22 R 36
4. COUNTY: Lee
5. REASON FOR TEST: ☐ INITIAL TEST PRIOR TO INJECTION

☐ AFTER WORKOVER

☒ FIVE YEAR TEST

☐ OTHER (SPECIFY) _____

6. DATE OF TEST: 11/24/95

7. TEST PRESSURE:

	TIME	TUBING	CASING	SURFACE CASING
	INITIAL	_____	<u>500</u>	_____
	15 MIN.	_____	<u>480</u>	_____
	30 MIN.	_____	<u>475</u>	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

8. TEST WITNESSED BY OCD: ☐ YES ☒ NO

IF YES, NAME OF OCD REP. _____

9. OPERATOR COMMENTS ON TEST: _____

10. WELL STATUS:

☐ ACTIVE

☒ TEMPORARILY ABANDONED

☐ OTHER (SPECIFY) _____

11. CHEVRON REPRESENTATIVE:

D.R. Jennings
NAME

Production Specialist
TITLE

D.R. Jennings
SIGNATURE

RECEIVED

AUG 21 1985

UCC FROBBS
OFFICE