

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

INSTRUCTIONS ON REVERSE  
SIDE

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

This form is not to be used for  
reporting packer leakage tests in  
Northwest New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

30-005-62587

CISF  
JP  
UT #1

Operator: <u>Plains Radio Petroleum Co.</u>		Lease: <u>Camel St</u>		Well No. <u>44</u>	
Location of Well	Unit	Sec. <u>6</u>	Twp. <u>9</u>	Rge. <u>27</u>	County <u>Chaves</u>
Name of Reservoir or Pool		Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tbg. or Csg)	Choke Size
Upper Compl	<u>Penn</u>	<u>GAS</u>	<u>Flow</u>	<u>Csg</u>	
Lower Compl	<u>ABO</u>	<u>GAS</u>	<u>Flow</u>	<u>Tbg.</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11:35 AM / 8-19-02

Well opened at (hour, date): 10:30 AM / 8-20-02

	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....		X
Pressure at beginning of test.....	<u>210</u>	<u>518</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>210</u>	<u>518</u>
Minimum pressure during test.....	<u>210</u>	<u>200</u>
Pressure at conclusion of test.....	<u>210</u>	<u>200</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>318</u>
Was pressure change an increase or a decrease?.....	<u>Stable</u>	<u>Decrease</u>
Well closed at (hour, date): <u>11:00 AM / 8-20-02</u>	Total Time On Production: <u>2 1/2 HRS.</u>	
Oil Production During Test: _____ bbls; Grav. _____	Gas Production During Test: _____ MCF; GOR _____	
Remarks <u>No Indication of Packer Leakage</u>		



FLOW TEST NO. 2

Well opened at (hour, date): 10:30 AM / 8-22-02

	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....	X	
Pressure at beginning of test.....	<u>210</u>	<u>550</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>210</u>	<u>550</u>
Minimum pressure during test.....	<u>170</u>	<u>550</u>
Pressure at conclusion of test.....	<u>210</u>	<u>550</u>
Pressure change during test (Maximum minus Minimum).....	<u>40</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>Decrease</u>	<u>Stable</u>
Well closed at (hour, date): <u>11:30 AM / 8-23-02</u>	Total time on Production: <u>25 HRS.</u>	
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test: _____ MCF; GOR _____	
Remarks <u>No Indication of Packer Leakage.</u>		

OPERATOR CERTIFICATE OF COMPLIANCE

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

Keltic Services Inc.  
Operator

Julian F Guajardo  
Signature

Julian F Guajardo Tester  
Printed Name Title

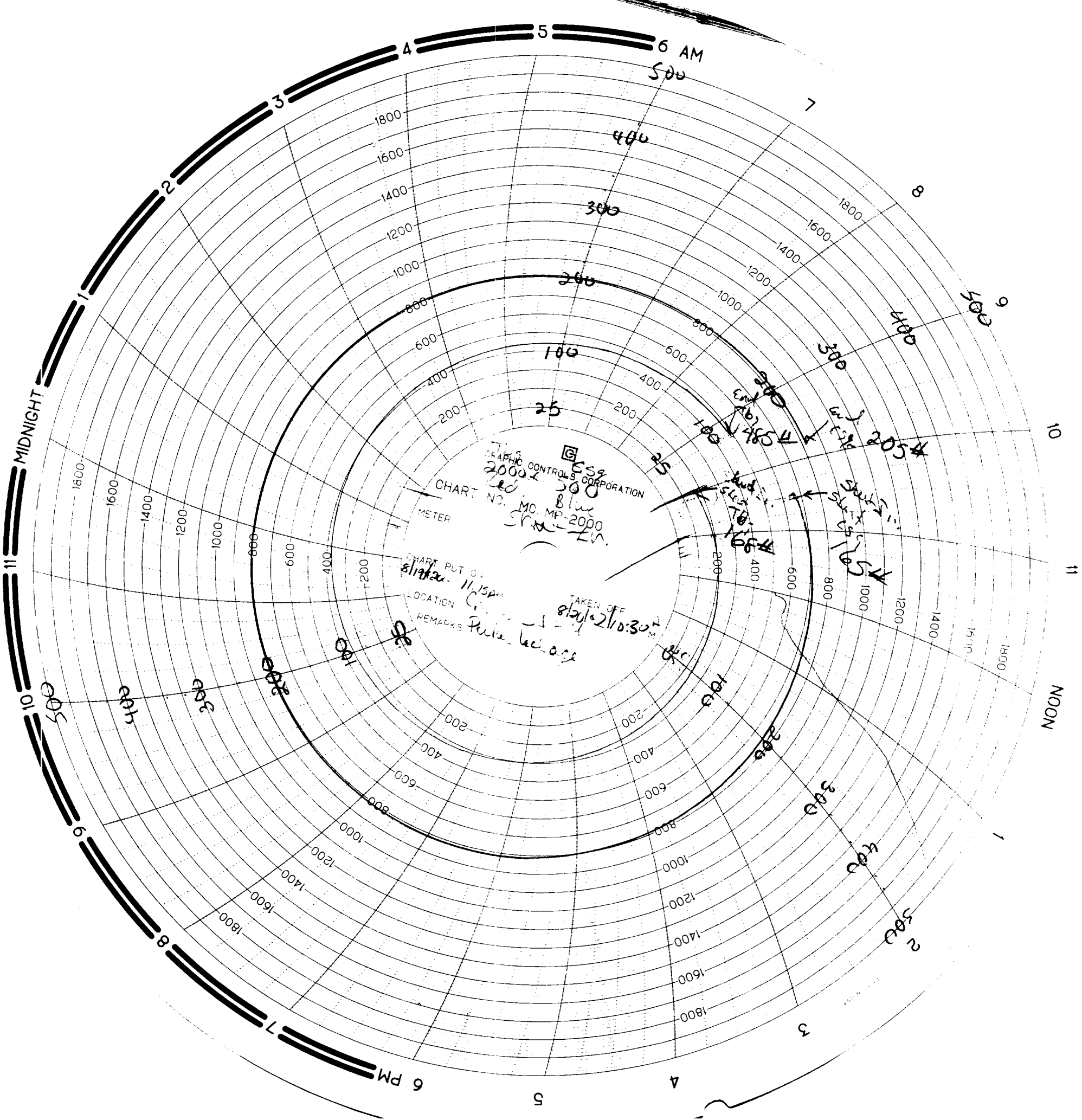
8-26-02 748-3259

OIL CONSERVATION DIVISION

Date Approved: SEP 15 2002

By: Julio Lopez

Title: \_\_\_\_\_



ESS9  
GRAPHIC CONTROLS CORPORATION  
CHART NO. 2000  
METER MC. MF-2000  
Red Blue  
SM. LN.

CHART PUT ON 8/17/20 11:15pm  
LOCATION C...  
REMARKS P... be... age  
TAKEN OF 8/20/21 10:30m

465  
205  
165  
165  
165

6 AM  
5  
4  
3  
2  
1  
MIDNIGHT  
11  
10  
9  
8  
7  
6 PM  
5  
4  
3  
2  
1  
NOON  
11  
10  
9  
8  
7  
6 AM  
5  
4  
3  
2  
1  
1800  
1600  
1400  
1200  
1000  
800  
600  
400  
200  
100  
25  
100  
200  
300  
400  
500  
600  
700  
800  
900  
1000  
1100  
1200  
1300  
1400  
1500  
1600  
1700  
1800









