1 Submit 3 Copies to Appropriate Dist. Office

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

Energy, Minerals and Natural Resources Department

State of New Mexico

Revised 1-1-89

- 0151

INSTRUCTIONS ON REVERSE SIDE

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

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

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator	Yates Petro	leum Corpor	ation Leas	Lease Hnulik "EJ" Fee		Well No. 1
Location of Well	Unit D	Sec. 26	Twp 17	Rge 26	County Ed	
	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	Atoka		None		CSG	
Lower Compl	Morrow		Gas	Lift	TBG	

Well opened at (hour, date): 08/15/2002 12:10pm		Upper	Lower
		Completion	Completion
Indicate by (X) the zone producing	·····		XXX
Pressure at beginning of test		0.0#	534#
Stabilized? (Yes or No)		Yes	Yes
Maximum pressure during test	·····	0.0#	534#
Minimum pressure during test		0.0#	210#
Pressure at conclusion of test		0.0#	397#
Pressure change during test (Maximum minus Minimum)	·····	0.0#	32́4#
Was pressure change an increase or a decrease?		able	Decrease
Well closed at (hour, date): 08/16/2002 12:10pm Total Time Production	e On 🦂	hours	
Oil Production Gas Production During Test: 0 bbls; Grav. During Test	100.8 N	1CF: GOR	
Remarks Atoka will not produce pressure is zero			
FI OW TEST NO 2	···	Upper	Lower
Well opened at (hour, date):FLOW TEST NO. 2		Upper Completion	Lower Completion
FLOW TEST NO. 2 Indicate by (X) the zone producing		Upper Completion	Completion
FLOW TEST NO. 2 Indicate by (X) the zone producing		Upper Completion	Completion
FLOW TEST NO. 2 Indicate by (X) the zone producing		Upper Completion	Completion
FLOW TEST NO. 2 Indicate by (X) the zone producing Pressure at beginning of test		Upper Completion	Completion
Well opened at (hour, date): FLOW TEST NO. 2 Indicate by (X) the zone producing. Pressure at beginning of test. Stabilized? (Yes or No). Maximum pressure during test. Minimum pressure during test. Minimum pressure during test.	2021202 202122 202122	Upper Completion	
FLOW TEST NO. 2 Well opened at (hour, date): Indicate by (X) the zone producing Pressure at beginning of test Stabilized? (Yes or No) Maximum pressure during test Ainimum pressure during test Pressure at conclusion of test	1819202121 25 25 25 25 25 25 25 25 25 25 25 25 25	Upper Completion	Completion
FLOW TEST NO. 2 Well opened at (hour, date): Indicate by (X) the zone producing Pressure at beginning of test Stabilized? (Yes or No) Maximum pressure during test Ainimum pressure during test Pressure at conclusion of test Pressure at conclusion of test Pressure change during test (Maximum minus Minimum)	212020131110 21202131 222725 252725	Upper Completion	
FLOW TEST NO. 2 Well opened at (hour, date): Indicate by (X) the zone producing Pressure at beginning of test Stabilized? (Yes or No) Maximum pressure during test Minimum pressure during test Pressure at conclusion of test Pressure at conclusion of test Pressure change during test (Maximum minus Minimum) Vas pressure change an increase or a decrease? Total time on	212020131110 21202131 222725 252725	Upper Completion	
FLOW TEST NO. 2 Well opened at (hour, date): Indicate by (X) the zone producing. Pressure at beginning of test. Stabilized? (Yes or No). Maximum pressure during test. Minimum pressure during test. Pressure at conclusion of test. Pressure change during test (Maximum minus Minimum). Vas pressure change an increase or a decrease? Vell closed at (hour, date)	212020131110 21202131 222725 252725	Upper Completion	
FLOW TEST NO. 2 Well opened at (hour, date): Indicate by (X) the zone producing. Pressure at beginning of test. Stabilized? (Yes or No). Maximum pressure during test. Minimum pressure during test. Pressure at conclusion of test. Pressure change during test (Maximum minus Minimum). Vas pressure change an increase or a decrease? Vell closed at (hour, date) Did production	102021212 102021212 102021212 102021212 102021 1020212 102021 10202	Upper Completion	
Well opened at (hour, date):	212020131110 21202131 222725 252725	Upper Completion	

I hereby certify that the information contained herein is true and completed to the best of my knowledge	
Yates Petroleum Corporation	Date Approved
Signature	By
Printed Name Title 08/22/2002 1-888-421-9453	1110 V
Date Telephoae No.	

INSTRUCTIONS FOR SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such test shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.

2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.

3 The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized and for minimum of two hours thereafter, provided, however, that they need not remain shutin more than 24 hours.

4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in. Such test shall be continued until the flowing wellhead pressure has become stabilized and for minimum of two hours thereafter, provided however, that the flow test need not continue for more than 24 hours.

5. Following completion of Flow Test No. 1, the well shall again be shut-in, in accordance with Paragraph 3 above.

6. Flow Test No. 2 shall be conducted even though no leak was indicated during Flow Test No. 1. Procedure for Flow Test No. 2 is to be the same as for Flow Test No. 1 except that the previously produced zone shall remain shut-in while the previously shut-in zone is produced.

7. All pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges, the accuracy of which must be checked with deadweight tester at least twice, once at the beginning and once at the end, of each flow test.

8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the appropriate District Office of the New Mexico Oil Conservation Division on Southeast New Mexico Packer Leakage Test Form Revised 1-1-89, together with the original pressure recording gauge charts with all the deadweight pressures which were taken indicated thereon. In lieu of filing the aforesaid charts, the operator may construct a pressure versus time curve from each zone of each test, indicating thereon all pressure changes which may be reflected by the gauge charts as well as all deadweight pressure readings which were taken. If the pressure curve is submitted, the original chart must be permanently filed in the operator's office. Form C-116 shall also accompany the Packer Leakage Test Form when the test period coincides with a gas-oil ratio test period.







