

Operator BURLINGTON RESOURCES Lease Name ARENICA B Well No. 3E
Location Of Well: Unit Letter J Sec 5 Twp 29N Rge 10W API # 30-0 45-24884

	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	<u>Mesa Verde</u>	<u>Gas</u>	<u>Art. Lift</u>	<u>tubing</u>
Lower Completion	<u>Dakota</u>	<u>Gas</u>	<u>flow</u>	<u>Casing</u>

Pre-Flow Shut-In Pressure Data

Upper Completion	Hour, Date, Shut-In <u>11:25 am 05/12/2009</u>	Length of Time Shut-In <u>72 hrs</u>	SI Press. Psig <u>98</u>	Stabilized? (Yes or No) <u>yes</u>
Lower Completion	Hour, Date, Shut-In <u>11:25 5/12/2009</u>	Length of Time Shut-In <u>72 hrs</u>	SI Press. Psig <u>0</u>	Stabilized? (Yes or No) <u>yes</u>

Flow Test No. 1

Commenced at (hour, date)*				Zone producing (Upper or Lower):	
Time (Hour, Date)	Lapsed Time Since*	Pressure		Prod. Zone Temp.	Remarks
		Upper Compl.	Lower Compl.		
<u>5/13/2009</u>	<u>24 hrs</u>	<u>121</u>	<u>0</u>	<u>91</u>	<u>RCVD MAY 21 '09</u>
<u>5/14/2009</u>	<u>36 hrs</u>	<u>148</u>	<u>0</u>	<u>91</u>	<u>OIL CONS. DIV.</u>
<u>5/15/2009</u>	<u>60</u>	<u>148</u>	<u>0</u>	<u>91</u>	<u>DIST. 3</u>
<u>5/16/2009</u>	<u>84</u>	<u>93</u>	<u>0</u>	<u>90</u>	<u>Start flowing well</u>
<u>8</u>					<u>test complete</u>

Production rate during test

Oil: _____ BOPD based on _____ Bbls. In _____ Hrs. _____ Grav. _____ GOR _____

Gas: _____ MCFPD; Test thru (Orifice or Meter): _____

Mid-Test Shut-In Pressure Data

Upper Completion	Hour, Date, Shut-In	Length of Time Shut-In	SI Press. Psig	Stabilized? (Yes or No)
Lower Completion	Hour, Date, Shut-In	Length of Time Shut-In	SI Press. Psig	Stabilized? (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 Compl. Lower Compl.		Prod. Zone Temp.	Remarks

Production rate during test

Oil: _____ BOPD based on _____ Bbls. In _____ Hrs. _____ Grav. _____ GOR _____

Gas: _____ MCFPD; Test thru (Orifice or Meter): _____

Remarks: _____

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

Approved **JUN 19 2009** 20 _____

New Mexico Oil Conservation Division

Rolly G. Roldan

Title Deputy Oil & Gas Inspector,
District #3Operator Burlington ResourcesBy *Cherri Kiny*Title MSO

E-mail Address _____

Date Tuesday May 19, 2009