



NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE
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<http://nemnr.state.nm.us/ocd/District/IIU3/district.htm>

NORTHWEST NEW MEXICO PACKER -LEAKAGE TEST

Operator McElvain Oil & Gas Lease Name Miller "A" Well No #1

Location of Well: UL A Sec. 13 Twp 24N Rge 7W API # 30-039-05502

| | 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 | Ballard P.C. | Gas | Flow | Tbg. |
| Lower Completion | Basin Dakota | Gas | Flow | Tbg. |

PRE-FLOW SHUT IN PRESSURE DATA

| | | | | |
|------------------|------------------------------|----------------------------------|-----------------------|-------------------------------|
| Upper Completion | Hour, date shut in 4-6-02 | Length of time shut-in 5 days | SI press. Psig 81 | Stabilized (Yes of No) Yes |
| Lower Completion | Hour, date shut in 4-6-02 | Length of time shut-in 3 days | SI press. Psig 376 | Stabilized (Yes of No) Yes |

FLOW TEST NO. 1

Commenced at (hour, date) 4-9-02 Zone Producing (Upper or Lower): Lower

| Time (hour, date) | LAPSED TIME SINCE | PRESSURE | | PROD. ZONE. TEMP. | REMARKS |
|----------------------|----------------------|------------------|------------------|----------------------|---------------|
| | | Upper Completion | Lower Completion | | |
| 4-9-02 | 0 | 81 | 376 | | |
| 4-11-02 | 2 days | 86 | 137 | | Line pressure |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours _____ Grav. _____ GOR _____

Gas: DK=186 MCFPD; Tested thru (Orifice of Meter): EPFS

Remarks:

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

Approved _____ 20 _____ Operator McElvain Oil & Gas

Mexico Oil Conservation Division By: Joe Elledge

By: _____ Title: Foreman

Title: _____ Date: 4-19-02