

STATE OF NEW MEXICO
ENERGY and MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

RECEIVED
MAR - 2 1995

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

OIL CON. DIV.
DIST. 3

Operator Caulkins Oil Company Lease BREECH "F" Well No. 1-E

Location

of Well: Unit M Sec. 33 Twp. 27N Rge. 5W County Rio Arriba

	NAME OF RESERVOIR OR POOL	TYPE OF PROD.	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. or Csg.)
Upper Comp.	TOCITO	Oil	Flow	Tubing
Lower Comp.	DAKOTA	Gas	Flow	Tubing

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized?(Yes or No)
Lower Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized?(Yes or No)

FLOW TEST NO. 1

Commenced at (hour, date)* 10:02 am 2/16/95				Zone producing (Upper or Lower):	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE Upper Comp. Lower Comp.		PROD. ZONE TEMP.	REMARKS
10:02 am 2/17/95	24 hrs.	635	362	60	Both Zones Shut-In
10:02 am 2/18/95	48 hrs.	703	364	60	Both Zones Shut-In
10:02 am 2/19/95	72 hrs.	740	365	60	Both Zones Shut-In
10:02 am 2/19/95	84 hrs.	440	365	60	Oil Zone Producing
10:02 am 2/20/95	96 hrs.	370	365	60	Oil Zone Producing

Production rate during test

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

Gas: _____ MCFPD: Tested thru (Orifice or Meter): _____

MID-TEST SHUT-IN PRESSURE DATA

Upper Comp.	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized?(Yes or No)
Lower Comp.	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		PROD. ZONE TEMP.	REMARKS
		Upper Comp.	Lower Comp.		

Production rate during test

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

Gas: _____ MCFPD: Tested thru (Orifice or Meter): _____

Remarks: _____

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

Approval _____ 19 _____

Operator _____ Caulkins Oil Company

New Mexico Oil Conservation Division

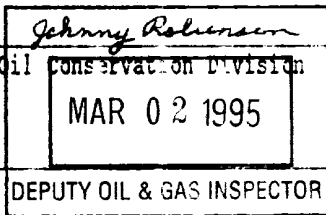
By _____ Robert L. Vergne

By _____

Title _____ Superintendent

Title _____

Date _____ February 28, 1995



NOTE: This format is in lieu of Oil Conservation Division, Packer Leakage Tests Form.