

CHEVRON U.S.A. INC.

Disposal/Injection Well
Pressure Test Report
New Mexico

1. LEASE NAME: Eunice monument
2. WELL NO: ESMV 283
3. LOCATION: Unit B Sec 8 T 21-S R 36E
4. COUNTY: Lea
5. REASON FOR TEST: Initial Test Prior to Injection
 After Workover
 Five Year Test
 Other (Specify) _____
6. DATE OF TEST: 10 Aug 1986

7. TEST PRESSURE:

Time	Tubing	Casing	Surface Casing
initial	<u>0</u>	<u>600</u>	<u>0</u>
15 min.	<u>0</u>	<u>610</u>	<u>0</u>
30 min.	<u>0</u>	<u>620</u>	<u>0</u>
_____	_____	_____	_____
_____	_____	_____	_____

8. TEST WITNESSED BY OCD: Yes No
If Yes, Name of OCD Representative _____

9. OPERATOR COMMENTS ON TEST: _____

10. WELL STATUS:

Active Temporarily Abandoned Other (Specify) Injection

11. CHEVRON REPRESENTATIVE: Arvis L Davis SUP
Name Title

Arvis L Davis
Signature