ATTN: Bonnie @ OCD

TUBING SIZE 2 3/8

CHEVRON U.S.A. INC.

PKR. SETTING DEPTH 3629

DISPOSAL/INJECTION WELL
PRESSURE TEST REPORT
NEW MEXICO

PERFS TOP & BOTTOM 3670-38

1. LEASE NAME: Arrowhead Grayburg Unit
2. WELL NO: 141 WIC
3. LOCATION: UNIT ____ SEC 36 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: 12-21-92
7. TEST PRESSURE:

TIME	TUBING	CASING	SURFACE CASING
INITIAL	—	300	—
15 MIN.	—	280	—
30 MIN.	—	280	✓

8. TEST WITNESSED BY OCD: ____ YES ✓ NO
   IF YES, NAME OF OCD REP. ____
9. OPERATOR COMMENTS ON TEST: ____
10. WELL STATUS:
    ✓ ACTIVE ____ TEMPORARILY ABANDONED ____ OTHER (SPECIFY) ____
11. CHEVRON REPRESENTATIVE: D.R. GRIFFIN (NAME) ESF&H Compliance Spr. (TITLE)

D.R. Griffin
SIGNATURE