

NEW MEXICO OIL CONSERVATION DIVISION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Revised June 9, 2003

30-015-30623

Well

Operator Yates Petroleum Corporation Lease Lucky Wolf "ATB" St.No. 1
Location Of Well: Unit I Section 32 Township T16S Range R27E County Eddy

	Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. (Flow Art. Lift)	Prod. Medium (Tbg. Or Cag.)	Choke Size
Upper Completion	Unknown	None	None	CSG	
Lower Completion	Atoka	Gas	Lift	TBG	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10/11/2004 12:10pm

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>10/12/2004 11:15am</u>		
Indicate by (X) the zone producing.....		XXX
Pressure at beginning of test.....	156#	499#
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	162#	499#
Minimum pressure during test.....	156#	357#
Pressure at conclusion of test.....	162#	419#
Pressure change during test (Maximum minus Minimum).....	6#	142#
Was pressure change an increase or a decrease?.....	Increase	Decrease
Well closed at (hour, date): <u>10/13/2004 11:20am</u>		
Oil Production During Test: <u>0</u> bbls; Grav. _____	Total Time On Production <u>24 hrs 5 min</u>	
Gas Production During Test: <u>21.4</u> MCF; GOR _____		
Remarks: <u>Casing is not hooked up or produced</u>		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Both zones shut-in at (hour, date): _____		
Well opened at (hour, date): _____		
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		
Maximum pressure during test.....		
Minimum pressure during test.....		
Pressure at conclusion of test.....		
Pressure change during test (Maximum minus Minimum).....		
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date): _____		
Oil Production During Test: _____ bbls; Grav. _____	Total Time On Production _____	
Gas Production During Test: _____		MCF; GOR _____
Remarks: _____		

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

Approved OCT 27 2004 _____ 20_____
New Mexico Oil Conservation Division

By _____
Title _____

Operator Wildcat Measurement Service

By Don Norman

Title Don Norman/Technician

E-mail Address _____

Date 10/24/2004



