30-015-10268

This form is not to be used For reporting Packer Leakage Test in Northwest New Mexico

NEW MEXICO OIL CONSERVATION DIVISION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Revised June 9, 2003

Operator Yates Petroleum Corporation Lease Marathon "AGI" State Well No. 1
Location Of Well: Unit A Section 33 Township T17S Range R24E 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	Wolfcamp	Gas	Flow	CSG	
Lower Completion	Atoka Morrow	None	None	TBG	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10/15/2012 10:20am

	Upper Completion	Lower Completion
Well opened at (hour, date): 10/16/2012 10:30am		
Indicate by (X) the zone producing	XXX	
Pressure at beginning of test	210#	0.0#
Stabilized? (Yes or No)	Yes	Yes
Maximum pressure during test	210#	0.0#
Minimum pressure during test	140#	0.0#
Pressure at conclusion of test	145#	0.0#
Pressure change during test (Maximum minus Minimum)	70#	0.0#
Was pressure change an increase or a decrease?	Decrease	Stable

Well closed at (hour, date): 10/17/2012 10:15am Total Time On Production 23 hours 45 minutes
Oil Production During Test: 0 bbls; Grav. _____; Gas Production During Test 24.8 MCF; GOR _____

Remarks: Atoka Morrow is not hooked up or produced pressure is zero

FLOW TEST NO. 2

Both zones shut-in at (hour, date): _____

	Upper Completion	Lower Completion
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): _____ Total Time On Production _____
Oil Production During Test: _____ bbls; Grav. _____; 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 _____ 20____
New Mexico Oil Conservation Division
Accepted for record NMOCD RT 11/8/12

By _____

Title _____

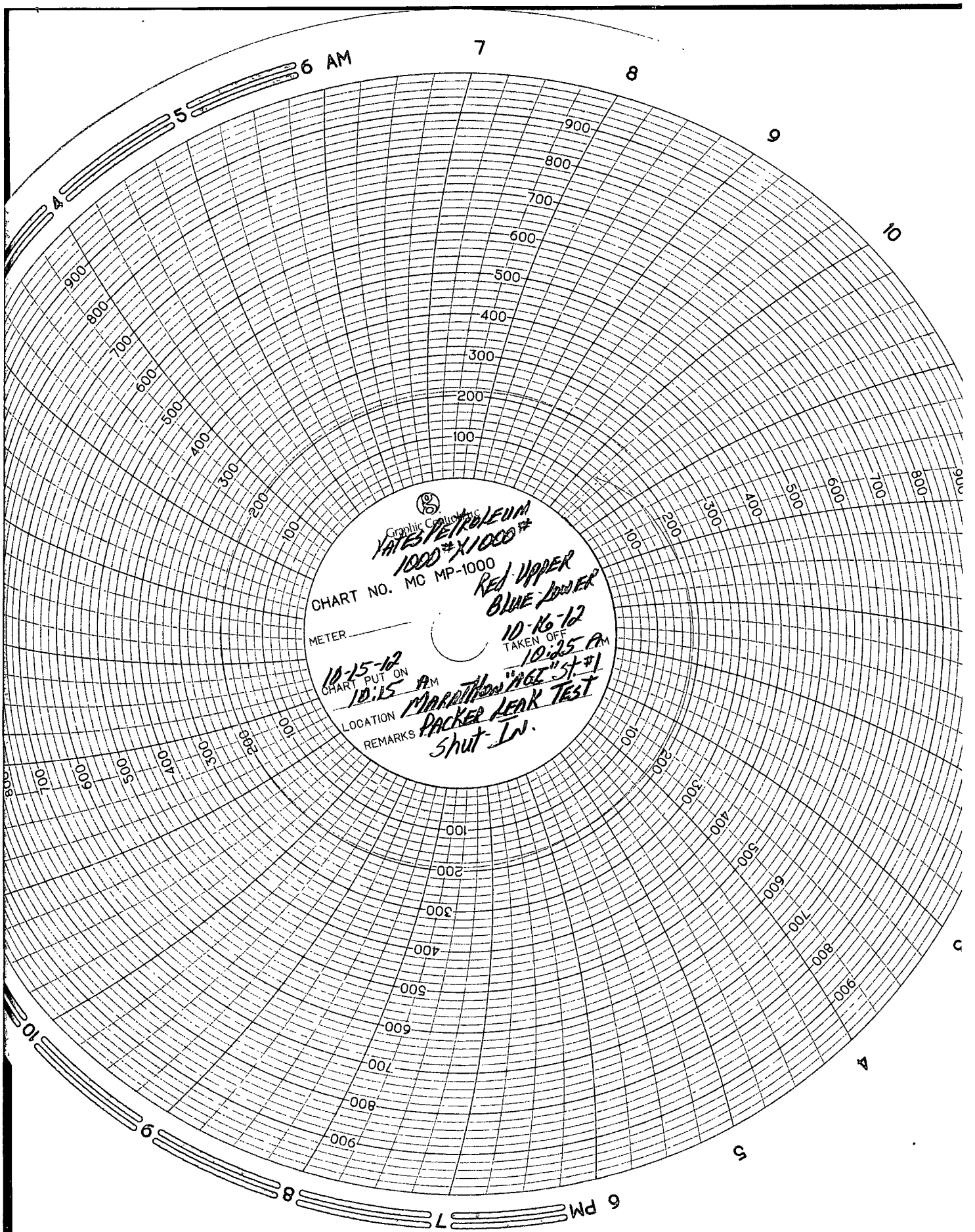
Operator Wildcat Measurement Service, Inc.

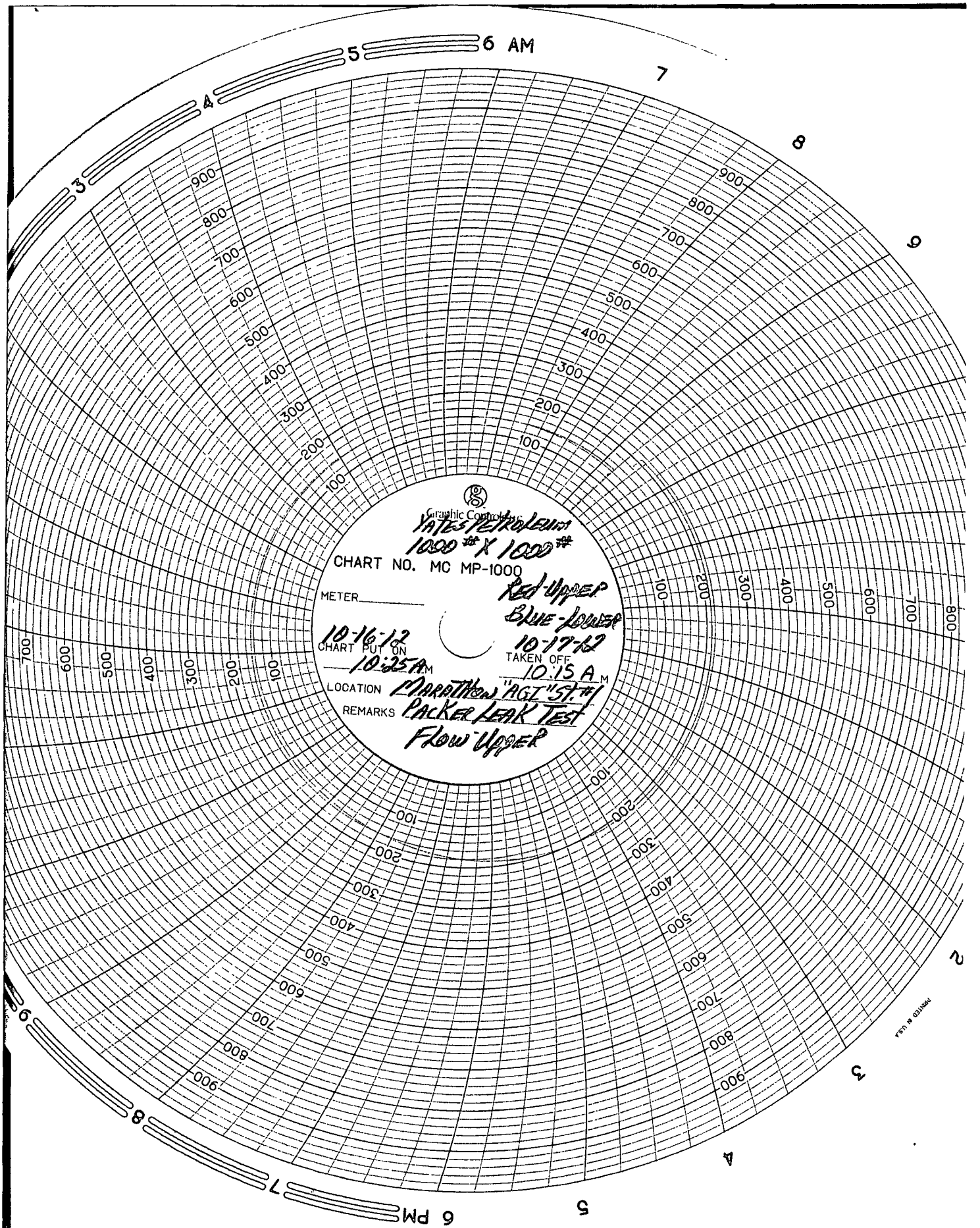
By _____

Title Don Norman/Technician

E-mail Address dnorman@wildcatms.com

Date 10/30/2012


6 AM
7
8
9
10
4
5
6 PM
7
8
9
10
4
5
Graphic Controls
YATES PETROLEUM
1000# X 1000#
CHART NO. MC MP-1000
RED UPPER
BLUE LOWER
METER
TAKEN OFF
10-16-12
10:25 AM
CHART PUT ON
10-15-12
10:15 AM
LOCATION MARATHON "AGI" St #1
REMARKS PACKER LEAK TEST
Shut In.


6 AM
7
8
9
10
11
12
1
2
3
4
5
6 PM
7
8
9
100
200
300
400
500
600
700
800
900
Graphic Controls
YATES PETROLEUM
1000 # X 1000 #
CHART NO. MC MP-1000
METER
Red-Upper
Blue-Lower
10-16-12
CHART PUT ON
10:25 AM
10-17-12
TAKEN OFF
10:15 AM
LOCATION Marathon "AGI" St. #1
REMARKS Packer Leak Test
Flow Upper
PRINTED IN U.S.A.