

NEW MEXICO OIL CONSERVATION DIVISION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Revised June 9, 2003

30-015-22329

Operator Yates Petroleum Corporation Lease Siegenthaler "IS" CoNo. 1
Location Of Well: Unit I Section 21 Township T17S Range R26E 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	Kennedy Farms Atoka	None	None	CSG	
Lower Completion	Kennedy Farms Morrow	Gas	Compressor	TBG	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10/12/2009 7:05am

Well opened at (hour, date): 10/13/2009 7:35am

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>XXX</u>
Pressure at beginning of test.....	<u>402#</u>	<u>274#</u>
Stabilized? (Yes or No).....	<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....	<u>402#</u>	<u>274#</u>
Minimum pressure during test.....	<u>378#</u>	<u>40#</u>
Pressure at conclusion of test.....	<u>378#</u>	<u>40#</u>
Pressure change during test (Maximum minus Minimum).....	<u>24#</u>	<u>234#</u>
Was pressure change an increase or a decrease?.....	<u>Decrease</u>	<u>Decrease</u>

Well closed at (hour, date): 10/14/2009 7:45am Total Time On Production 24 hours 10 min.

Oil Production _____ Gas Production _____

During Test: 0 bbls; Grav. _____; During Test 35.0 MCF; GOR _____

Remarks: Atoka zone not hooked up, zone is not produced

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 _____ Gas Production _____

During Test: _____ bbls; Grav. _____; 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

Operator Wildcat Measurement Service, Inc.

By [Signature]

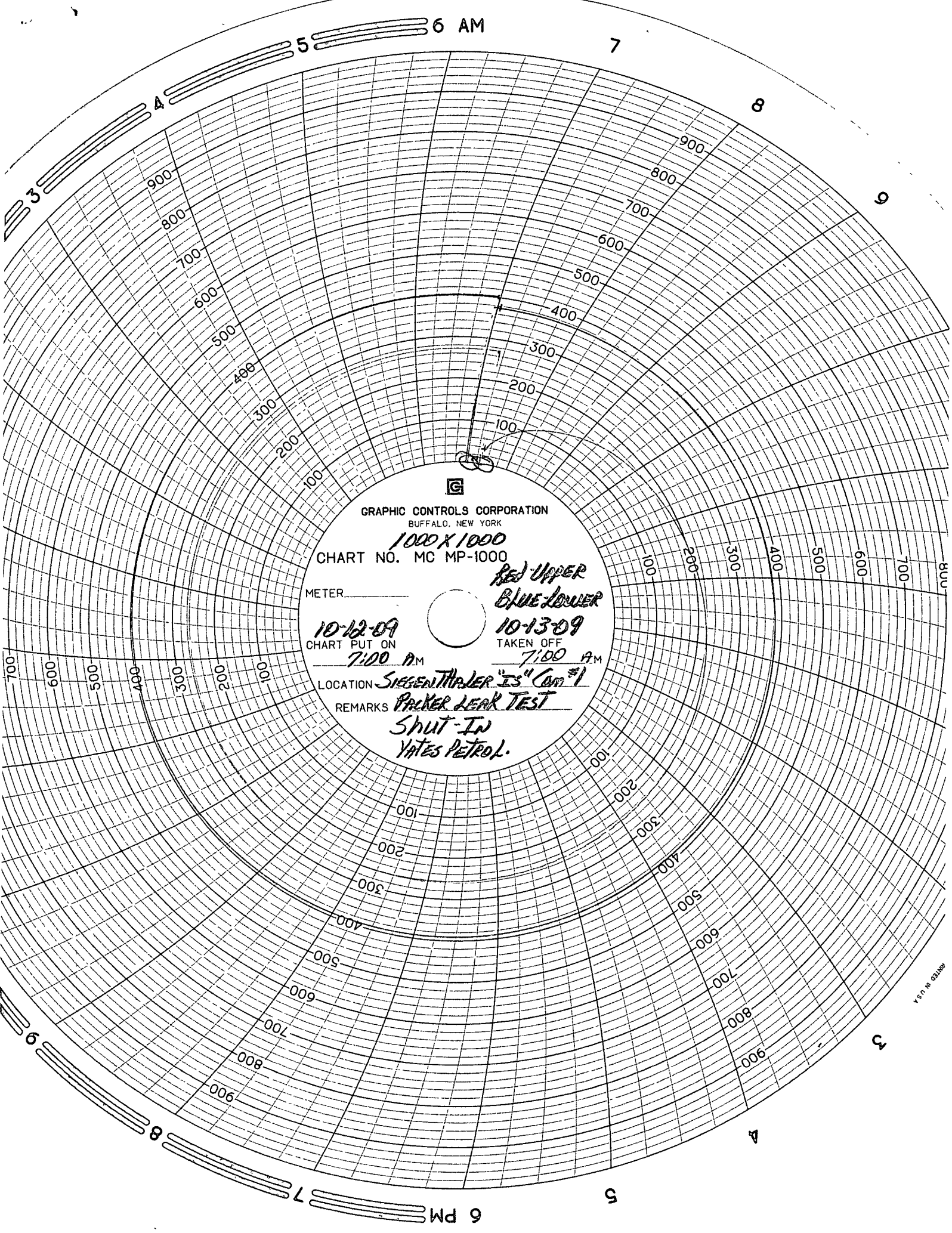
By _____

Title Don Norman/Technician

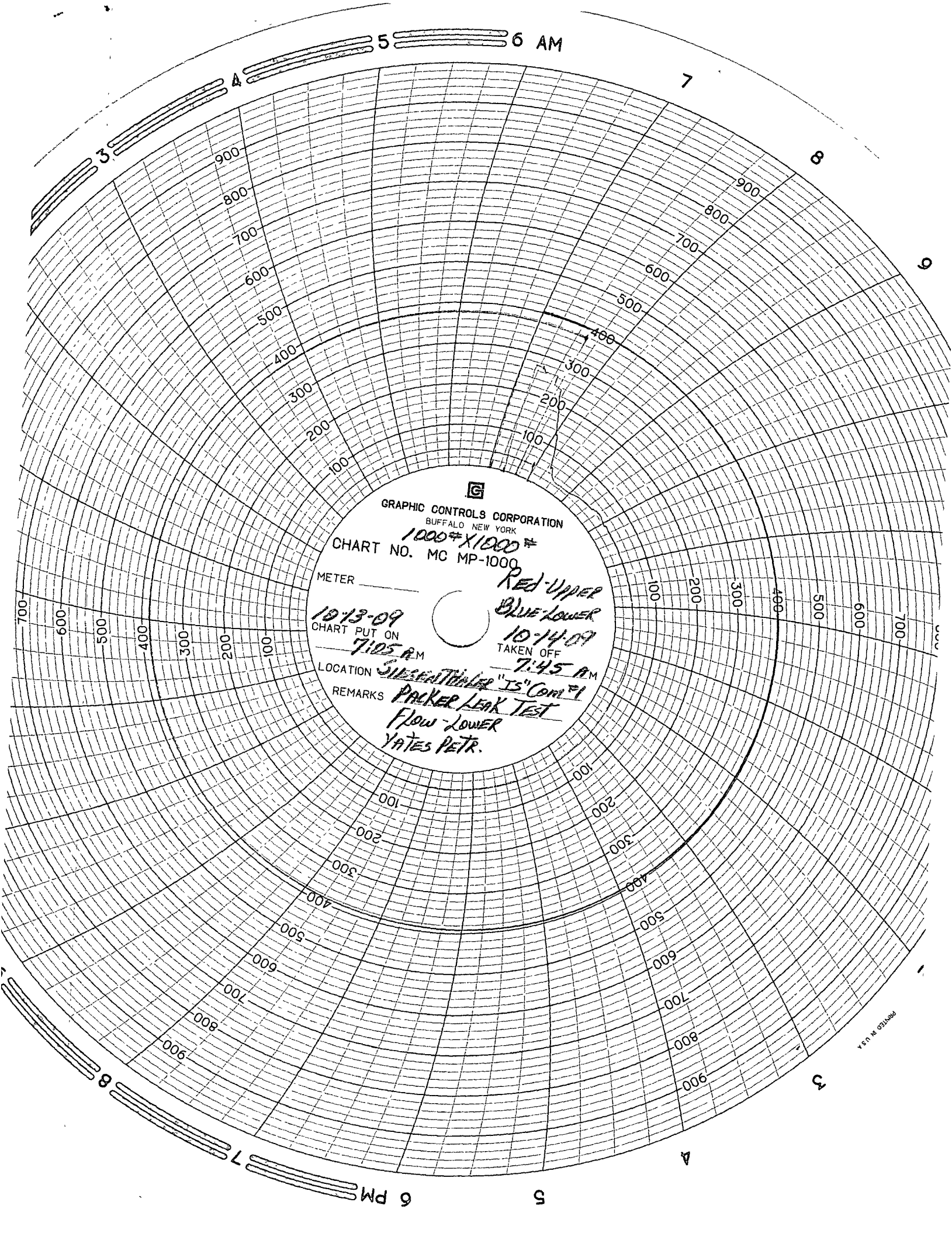
Title _____

E-mail Address dnorman@wildcatms.com

Date 10/24/2009



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
1000 X 1000
CHART NO. MC MP-1000
METER _____
10-12-09 CHART PUT ON 7:00 AM
10-13-09 TAKEN OFF 7:00 AM
LOCATION SIEGENTHALER "IS" Con #1
REMARKS PACKER LEAK TEST
SHUT-IN
YATES PETROL.



GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK

1000# X 1000#
CHART NO. MC MP-1000

METER _____

10-13-09
CHART PUT ON
7:05 AM

Red Upper
Blue Lower
10-14-09
TAKEN OFF
7:45 AM

LOCATION SUBSTATION "IS" CORP #1
REMARKS PACKER LEAK TEST
Flow Lower
YATES PETR.

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