

NEW MEXICO OIL CONSERVATION DIVISION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Revised June 9, 2003

Operator Murchison Oil & Gas Lease Mustang Fed. Com No. 2
Location Of Well: Unit I Section 21 Township T18S Range R29E 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	Atoka	None	None	CSG	
Lower Completion	Morrow	Gas	Flow	TBG	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10/14/2009 9:50am

Well opened at (hour, date): 10/15/2009 9:50am

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		XXX
Pressure at beginning of test.....	599#	395#
Stabilized? (Yes or No).....	Yes	No
Maximum pressure during test.....	602#	395#
Minimum pressure during test.....	595#	100#
Pressure at conclusion of test.....	600#	104#
Pressure change during test (Maximum minus Minimum).....	7#	295#
Was pressure change an increase or a decrease?.....	Decrease	Decrease

Well closed at (hour, date): 10/16/2009 9:20am Total Time On Production 23 hours 30 min.

Oil Production _____ Gas Production _____

During Test: 0 bbls; Grav. _____; During Test 684.8 MCF; GOR _____

Remarks: Atoka Zone is not hooked up or 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]

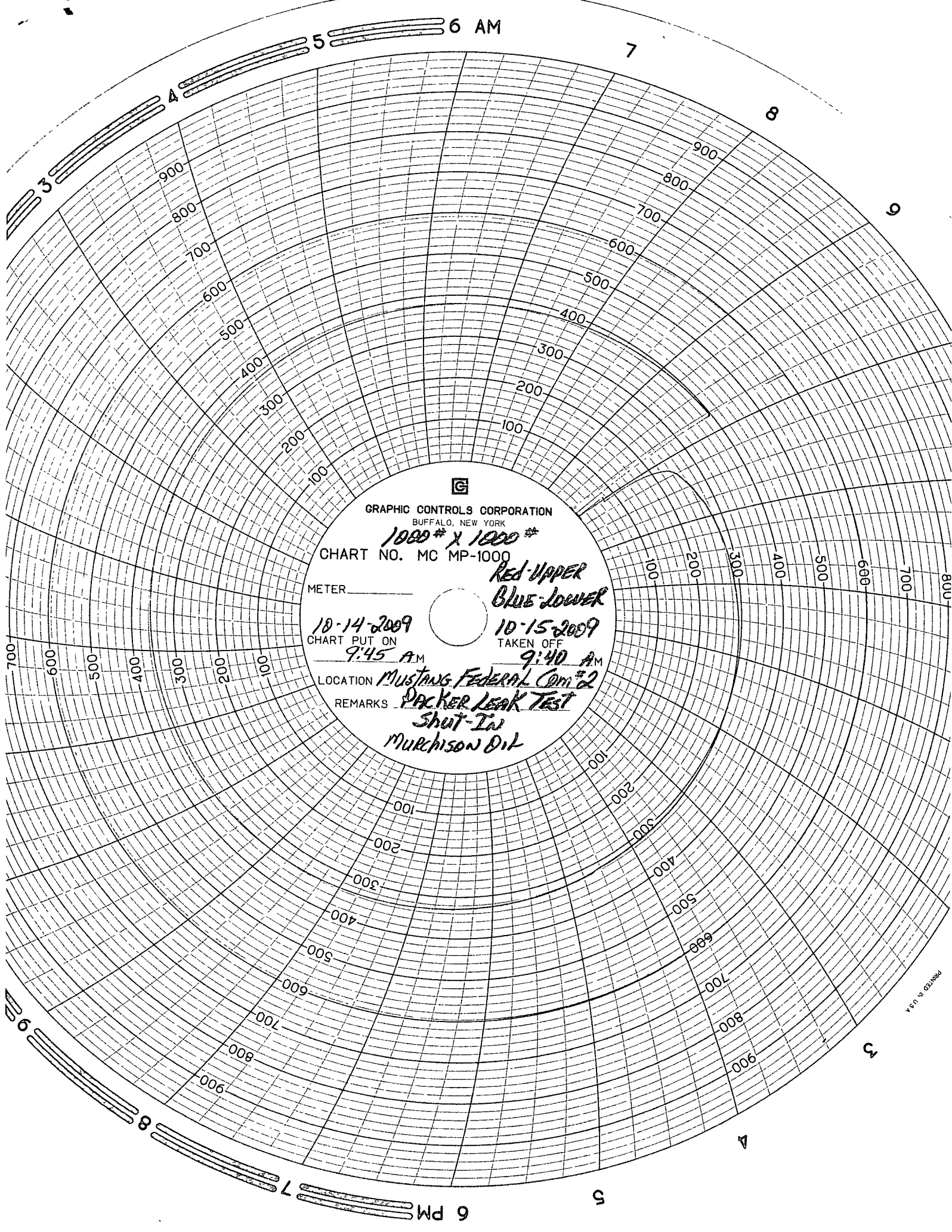
By _____

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 _____

10-14-2009

CHART PUT ON

9:45 AM

LOCATION *MUSTANG FEDERAL COM #2*

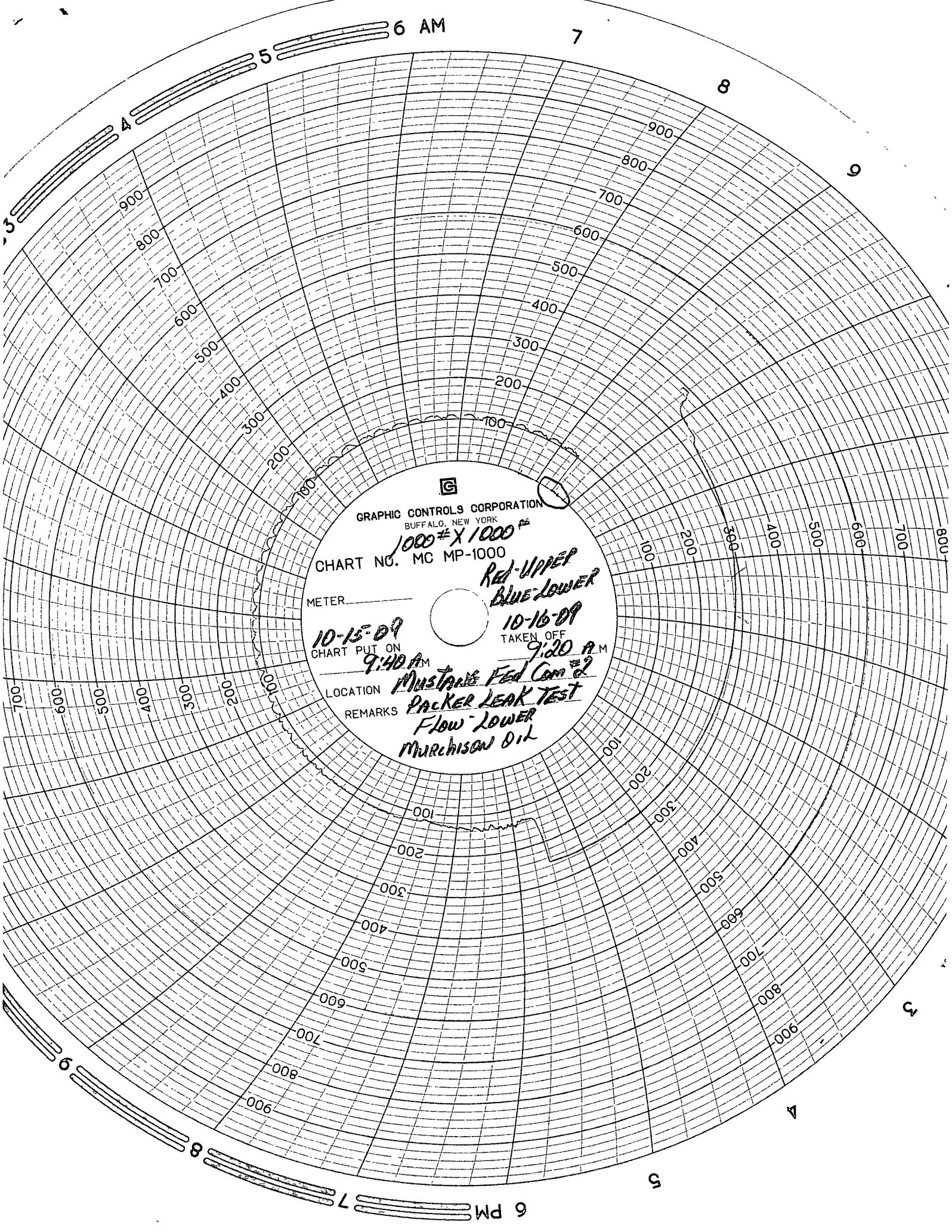
REMARKS *PACKER LEAK TEST*
SHUT-IN
MURCHISON OIL

RED-UPPER
BLUE-LOWER

10-15-2009

TAKEN OFF

9:40 AM



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

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

METER _____

10-15-09
CHART PUT ON
9:40 AM

10-16-09
TAKEN OFF
9:20 AM

LOCATION *MUSTANG FED Cam #2*

REMARKS *PACKER LEAK TEST
Flow - LOWER
MURCHISON OIL*

