Submit 3 Copies to Appropriate Dist. Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Revised 1-1-89

INSTRUCTIONS ON REVERSE SIDE

This form is not to be used for reporting packer leakage tests in Northwest New Mexico

RECEIVED
OCT 29 2003
OCD-ARTESIA

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator		Lease		Well No.
EASTLAND O.I.		EASTLAND ST		4

Location of Well	Unit	Sec.	Twp	Rge	County
	K	13	9S	26E	Chaves

	Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tbg. or Csg)	Choke Size
Upper Compl	WolfCamp	GAS	Flow	Csg	
Lower Compl	Pre-Permian	GAS	Flow	Tbg	

30-005-62686

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11:00am / 10/24/03

Well opened at (hour, date): 12:00pm / 10-22-03

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		X
Pressure at beginning of test	210	230
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	210	230
Minimum pressure during test	210	100
Pressure at conclusion of test	210	100
Pressure change during test (Maximum minus Minimum)	0	130
Was pressure change an increase or a decrease?	Stable	Decrease

Well closed at (hour, date): 11:30Am / 10-23-03 Total Time On Production 23½ Hrs.

Oil Production During Test: _____ bbls; Grav. _____ Gas Production During Test _____ MCF; GOR _____

Remarks NO Indication of a Packer Leak (Re-Test of Well)

FLOW TEST NO. 2

Well opened at (hour, date): 11:00Am / 10-24-03

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	210	250
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	210	285
Minimum pressure during test	140	250
Pressure at conclusion of test	140	285
Pressure change during test (Maximum minus Minimum)	70	35
Was pressure change an increase or a decrease?	Decrease	Increase

Well closed at (hour, date) 11:40Am / 10-25-03 Total time on Production 24 HRS.

Oil production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ MCF; GOR _____

Remarks NO Indication of A Packer Leak (Re-Test of Well)

OPERATOR CERTIFICATE OF COMPLIANCE

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

Keltic Services Inc.
Operator

Julian T. Guajardo
Signature

Julian T. Guajardo Tester
Printed Name Title

10-28-03 748-3759
Date Telephone No.

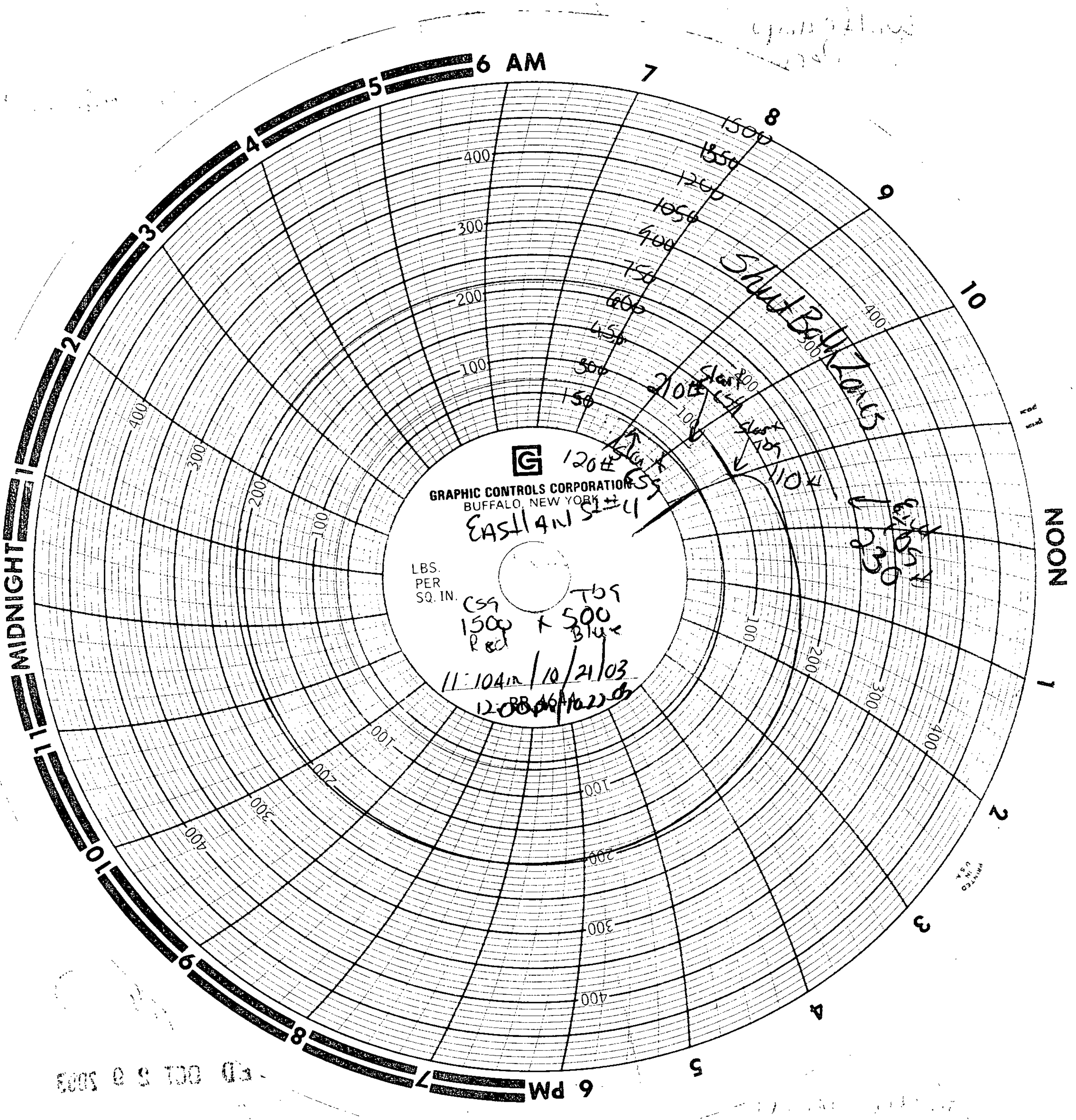
OIL CONSERVATION DIVISION

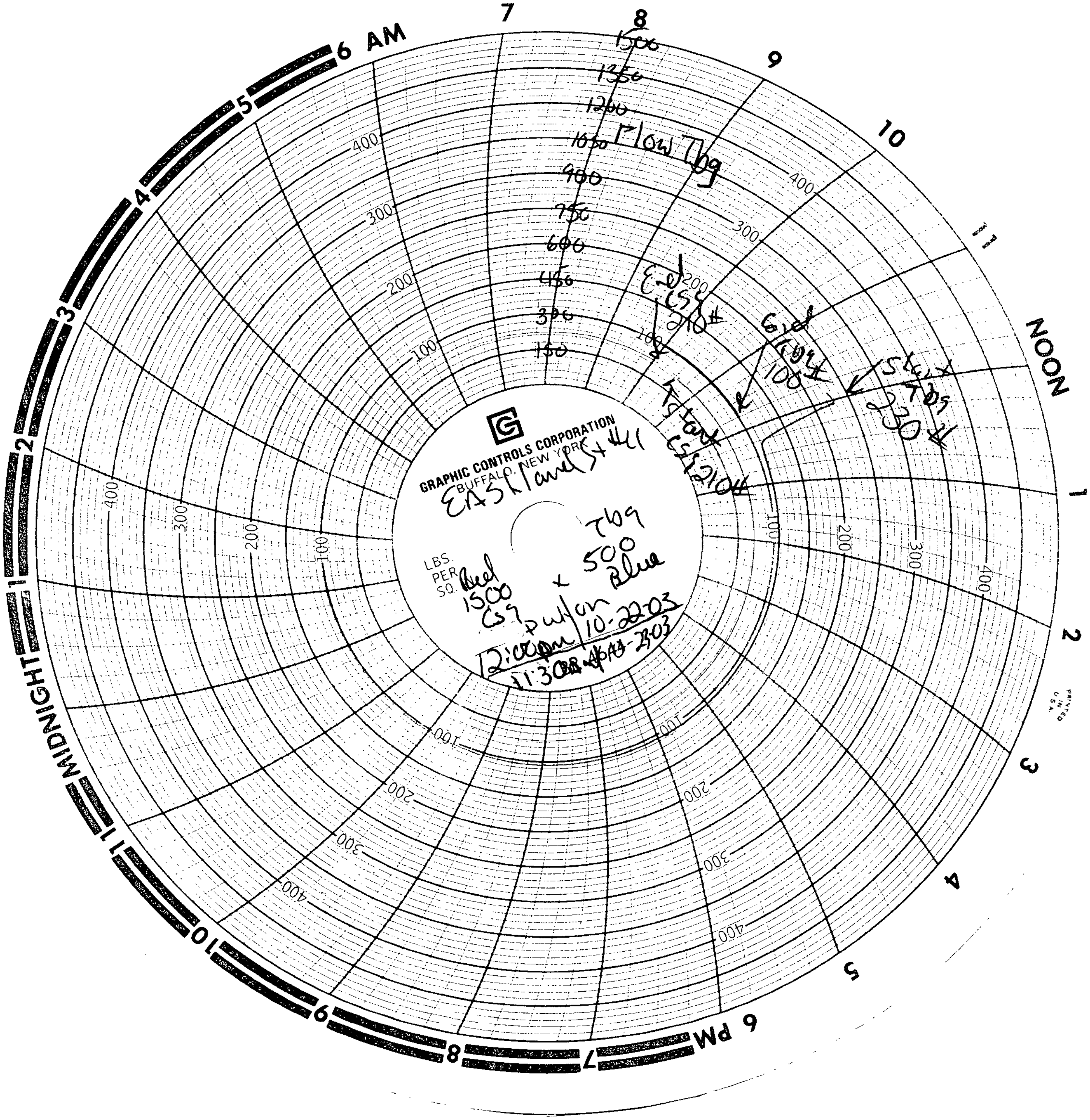
APPROVED OCT 29 2003

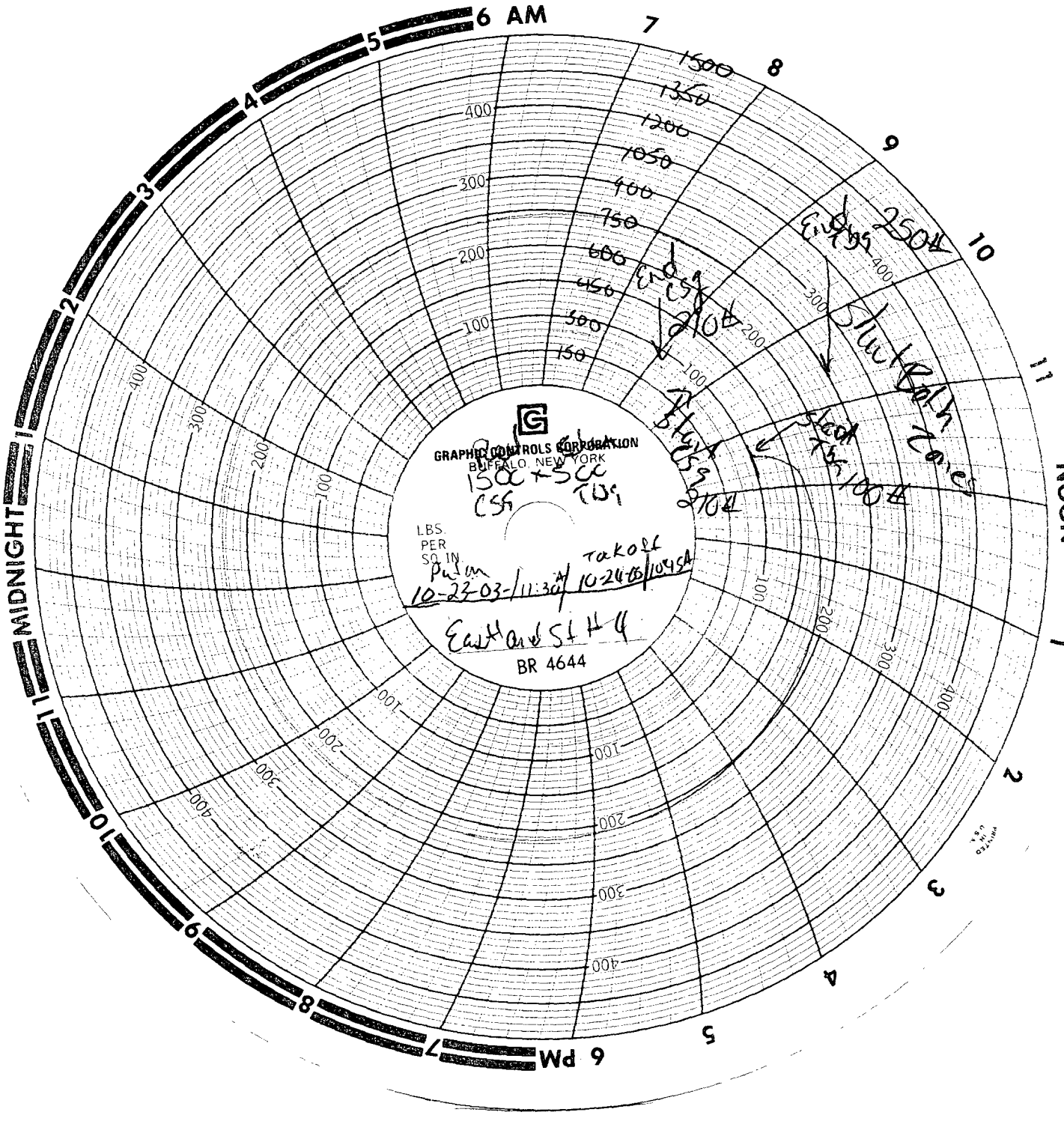
Date Approved _____

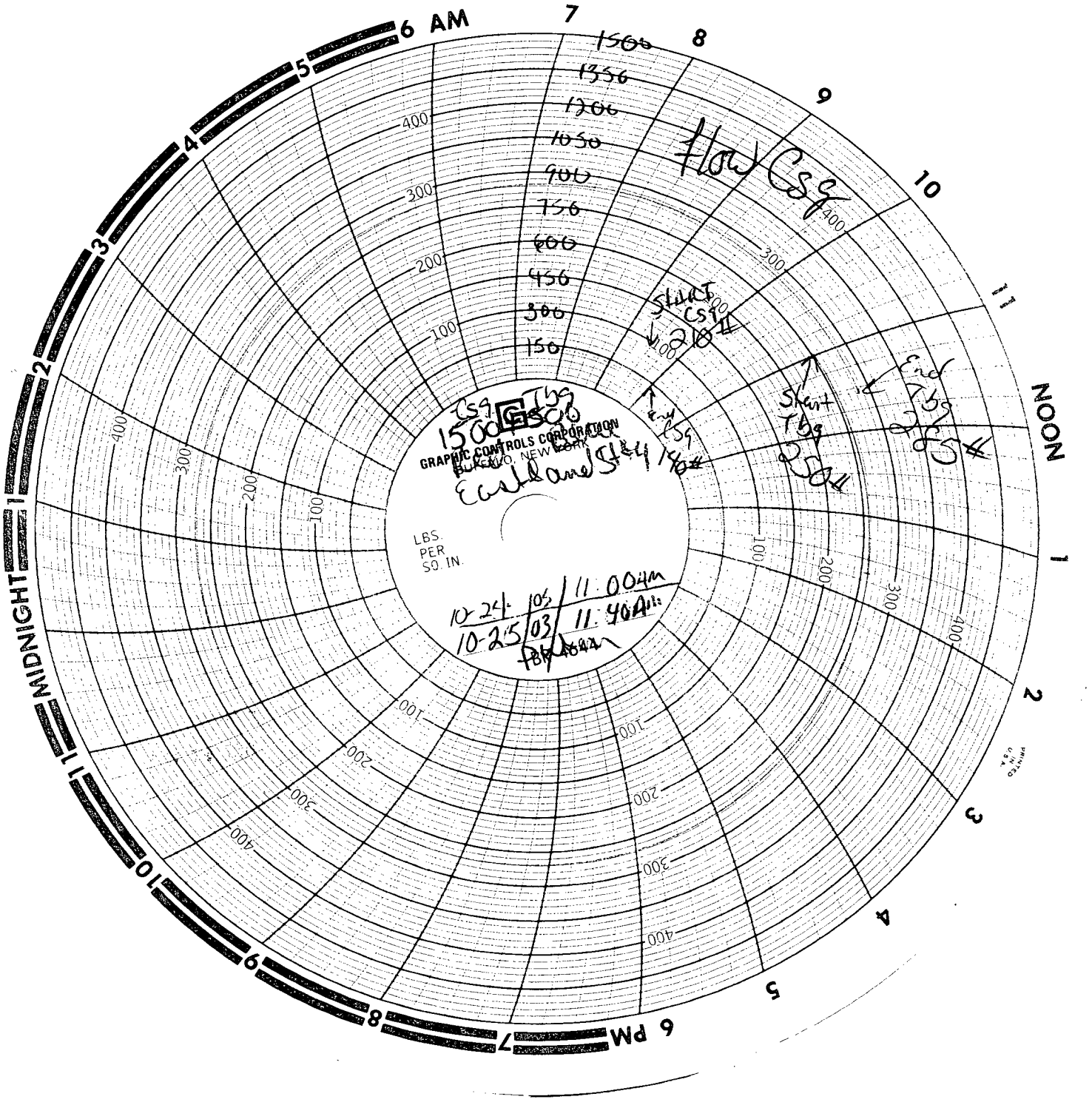
By _____

Title _____


GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
LBS.
PER
SQ. IN.
6 AM
NOON
6 PM
MIDNIGHT
East 4N S #1
CSG 1500 Red
TBG 500 Blue
11:10 AM 10/21/03
12:00 PM 10/22/03
Shut Back Zones
120#
210#
110#
Start CSG
Start TBG


GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
LBS. PER SQ.
6 AM
NOON
6 PM
MIDNIGHT
Flow Tbg
Tbg
500
Blue
Red
1500
Csg
10-22-03
12:00pm


6 AM
NOON
MIDNIGHT
6 PM
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK
LBS PER SQ IN
BR 4644


6 AM
7
8
9
10
11
NOON
1
2
3
4
5
6 PM
7
8
9
10
11
MIDNIGHT
1
2
3
4
5
6
100
200
300
400
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
LBS.
PER
SQ. IN.
10-24 10 11.00AM
10-25 03 11.40AM
Flow Csg
Start Csg 210#
End Csg 140#
Start Tbg 250#
End Tbg 285#