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

C15F
Op

## SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

| Operator | Chesapeake | Lease | Chaves "A" Federal | Well No. #1 |
|---|---|---|---|---|
| Location of Well: Unit | B | Sec. 21 | Twp 7S | Rge 26E | County 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 | Abo | GAS | Flow | Csg | |
| Lower Compl | Wolfcamp | GAS | Flow | Tbg | |

### FLOW TEST NO. 1

Both zones shut-in at (hour, date): 12:15pm / 9-3-02

Well opened at (hour, date): 11:30Am / 9-4-02

| | Upper Completion | Lower Completion |
|---|---|---|
| Indicate by ( X ) the zone producing | | X |
| Pressure at beginning of test | 85 | 259 |
| Stabilized? (Yes or No) | Yes | Yes |
| Maximum pressure during test | 85 | 259 |
| Minimum pressure during test | 85 | 130 |
| Pressure at conclusion of test | 85 | 130 |
| Pressure change during test (Maximum minus Minimum) | 0 | 159 |
| Was pressure change an increase or a decrease? | Stable | Decrease |

Well closed at (hour, date): 11:50Am / 9-5-02 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

### FLOW TEST NO. 2

Well opened at (hour, date): 11:50Am / 9-6-02

| | Upper Completion | Lower Completion |
|---|---|---|
| Indicate by ( X ) the zone producing | X | |
| Pressure at beginning of test | 85 | 280 |
| Stabilized? (Yes or No) | Yes | Yes |
| Maximum pressure during test | 85 | 280 |
| Minimum pressure during test | 75 | 280 |
| Pressure at conclusion of test | 75 | 280 |
| Pressure change during test (Maximum minus Minimum) | 10 | 0 |
| Was pressure change an increase or a decrease? | Decrease | Stable |

Well closed at (hour, date) 11:45Am / 9-7-02 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

### OPERATOR CERTIFICATE OF COMPLIANCE

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

Kelly Services Inc
Operator

Julian F. Guajardo
Signature

Julian F Guajardo Tester
Printed Name Title

9-9-02 748-3759

### OIL CONSERVATION DIVISION

Date Approved SEP 16 2002

By _____

Title Field Rep II

SEP 2002
RECEIVED
OCD - ARTESIA