

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Yates Petroleum Corp</u>			Lease <u>TERRA 35 State</u>			Well No. <u>1</u>		
Location of Well		Unit <u>H</u>	Sec. <u>35</u>	Twp <u>9</u>	Rge <u>26</u>	County <u>Chaves</u>		
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	<u>Ranch floor Devonian</u>			<u>GAS</u>	<u>Flow</u>	<u>TBG</u>		<u>3/64</u>
Lower Compl	<u>Ranch floor Wolfcamp</u>			<u>GAS</u>	<u>Flow</u>	<u>Csg.</u>		<u>3/64</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9-21-01

Well opened at (hour, date): 9:30 9-25-01

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>335</u>	<u>480</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>345</u>	<u>480</u>
Minimum pressure during test.....	<u>335</u>	<u>385</u>
Pressure at conclusion of test.....	<u>345</u>	<u>385</u>
Pressure change during test (Maximum minus Minimum).....	<u>10</u>	<u>105</u>
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>DECREASE</u>
Well closed at (hour, date): <u>805 9/26/01</u>	Total Time On Production <u>Approx 24 hrs</u>	
Oil Production During Test: <u>0</u> bbls; Grav. <u>—</u>	Gas Production During Test <u>310</u> MCF; GOR <u>—</u>	

Remarks _____

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): _____	<u>X</u>	
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....	<u>150</u>	<u>520</u>
Stabilized? (Yes or No):.....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>150</u>	<u>540</u>
Minimum pressure during test.....	<u>145</u>	<u>540</u>
Pressure at conclusion of test.....	<u>145</u>	<u>540</u>
Pressure change during test (Maximum minus Minimum).....	<u>5</u>	<u>20</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>INCREASE</u>
Well closed at (hour, date): <u>9:20</u>	Total time on Production <u>Approx 24 hrs</u>	
Oil production During Test: <u>0</u> bbls; Grav. <u>—</u>	Gas Production During Test <u>143</u> MCF; GOR <u>—</u>	

Remarks _____

OPERATOR CERTIFICATE OF COMPLIANCE

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

Yates Petroleum Corp

Operator

Jeff Deck

Signature

Jeff Deck

Printed Name

9/29/01

Date

Title

505-622-9874

Telephone No.

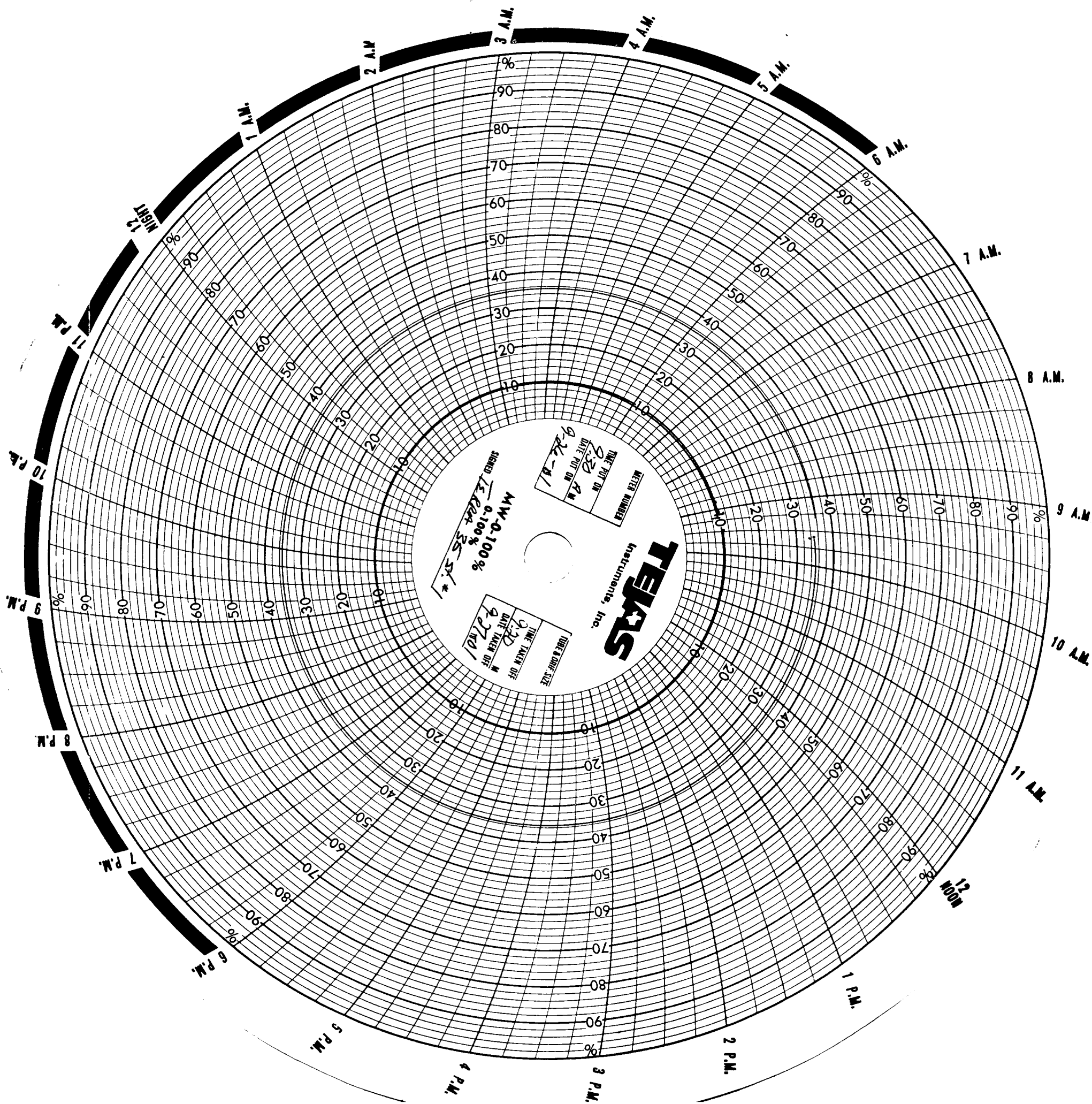
OIL CONSERVATION DIVISION

Date Approved 10-25-01

By

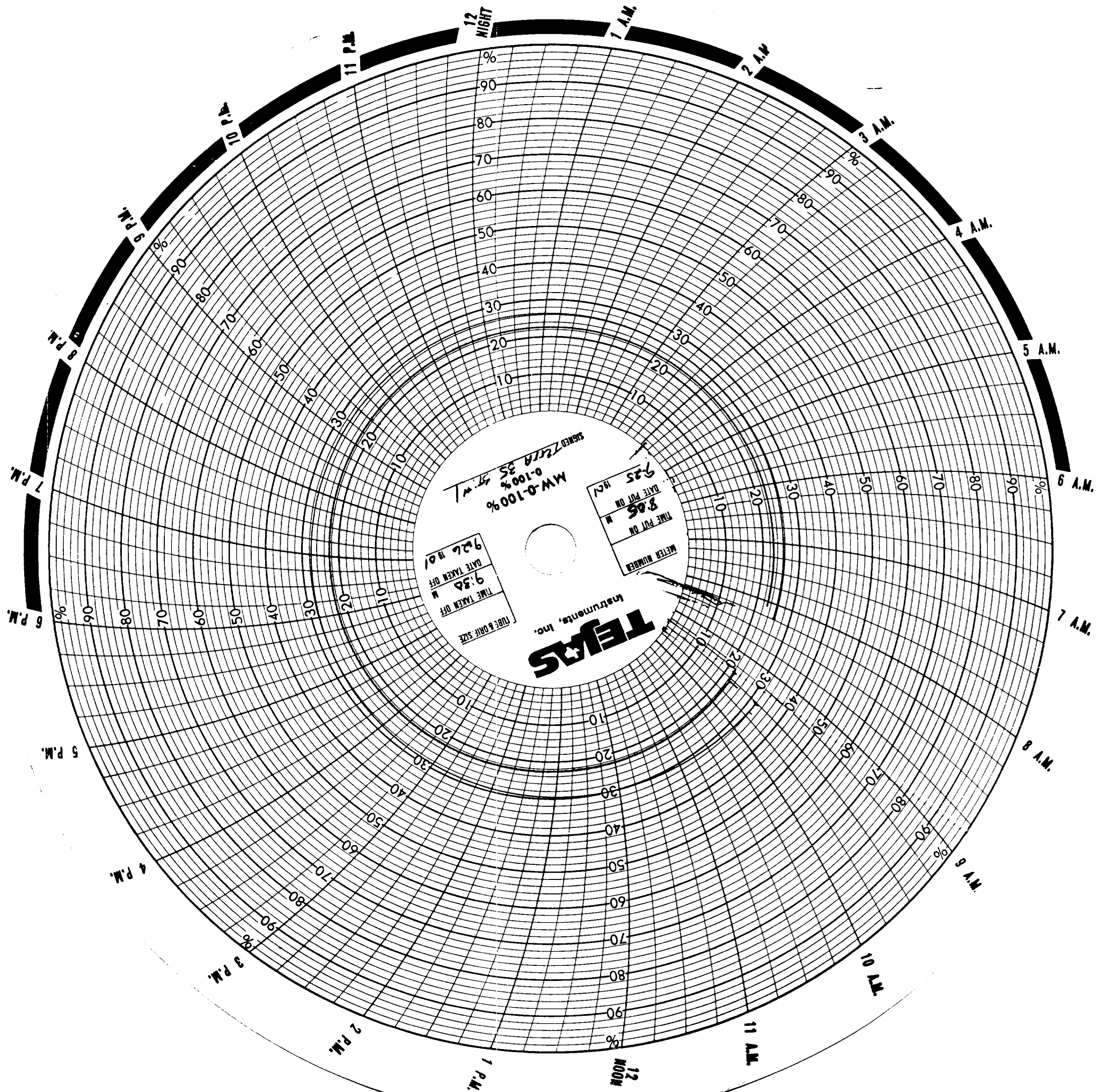
Title

Wild Up ID



Red - casing - Flow
Plus - tubing - to flow
Volume: 142.87





Blue - Tubing - Flowing
Red - Casing - No Flow
Volume: 309.84

