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Appropriate Dist. Office

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

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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
Northwest New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>YATES PETROLEUM CORP.</u>		Lease <u>ALLIED "AUS" ST. CORP.</u>		Well No. <u>2</u>	
Location of Well	Unit <u>L</u>	Sec. <u>33</u>	Twp <u>09S</u>	Rge <u>26E</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>Wolfcamp</u>	<u>GAS</u>	<u>Flow</u>	<u>TBG.</u>	<u>24/64</u>
Lower Compl	<u>ORDOVICIAN</u>	<u>GAS</u>	<u>Flow</u>	<u>Csg.</u>	<u>24/64</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:30 AM

Well opened at (hour, date): 11:25 AM 8-18-2002

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>0</u>	<u>X</u>
Pressure at beginning of test.....	<u>YES</u>	<u>YES</u>
Stabilized? (Yes or No).....	<u>0</u>	<u>170</u>
Maximum pressure during test.....	<u>0</u>	<u>160</u>
Minimum pressure during test.....	<u>0</u>	<u>170</u>
Pressure at conclusion of test.....	<u>10</u>	<u>10</u>
Pressure change during test (Maximum minus Minimum).....	<u>—</u>	<u>INCREASE</u>
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date): <u>10:55 8-19-02</u>	Total Time On Production <u>23.5 HRS.</u>	
Oil Production During Test: <u>0</u> bbls; Grav. <u>0</u>	Gas Production During Test <u>272</u> MCF; GOR <u>0</u>	
Remarks <u>30 BBL H₂O</u>		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>10:55 AM 8-19-02</u>	<u>X</u>	
Indicate by (X) the zone producing.....	<u>0</u>	<u>210</u>
Pressure at beginning of test.....	<u>YES</u>	<u>YES</u>
Stabilized? (Yes or No).....	<u>160</u>	<u>1110</u>
Maximum pressure during test.....	<u>0</u>	<u>210</u>
Minimum pressure during test.....	<u>160</u>	<u>1110</u>
Pressure at conclusion of test.....	<u>160</u>	<u>900</u>
Pressure change during test (Maximum minus Minimum).....	<u>INCREASE</u>	<u>INCREASE</u>
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date): <u>7:50 AM 8-20-02</u>	Total time on Production <u>21 HRS</u>	
Oil production During Test: <u>0</u> bbls; Grav. <u>0</u>	Gas Production During Test <u>0</u> MCF; GOR <u>—</u>	
Remarks <u>ZONE STABILIZED AT LINE PRESSURE 160# PSIG</u>		

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

Date 8-21-02

MEASUREMENT TECH.

Title

Telephone No. 505-632-0785

OIL CONSERVATION DIVISION

Date Approved AUG 30 2002

By [Signature]

Title [Signature]