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			Lease		Well No.
CHEVRON USA INC.			GRAHAM STATE NCT-C		8
Location of Well: Unit J	Sec. 25	Twp 19	Rge 36	County Lea	

	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	EUMONT YATES 7-R. QUEEN	GAS	FLOW	CSG	2" W.O.
Lower Compl	EUNICE MONUMENT G-SA	OIL	ART LIFT	TBG	2" W.O.

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 AM

Well opened at (hour, date): 9:30 AM

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		X
Pressure at beginning of test	115	10
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	124	20
Minimum pressure during test	115	10
Pressure at conclusion of test	124	20
Pressure change during test (Maximum minus Minimum)	9	10
Was pressure change an increase or a decrease?	INC.	DEC.

Well closed at (hour, date): 9:30 AM Total Time On Production 24

Oil Production During Test: 28 bbls; Grav. 31.8 Gas Production During Test 7.0 MCF; GOR 250

Remarks

FLOW TEST NO. 2

Well opened at (hour, date): 9:30 AM

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	130	20
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	130	20
Minimum pressure during test	24	10
Pressure at conclusion of test	24	10
Pressure change during test (Maximum minus Minimum)	106	10
Was pressure change an increase or a decrease?	DEC.	DEC.

Well closed at (hour, date) 9:30 AM Total time on Production 24

Oil production During Test: 0 bbls; Grav. ____; Gas Production During Test 490.0 MCF; GOR ____

Remarks

OPERATOR CERTIFICATE OF COMPLIANCE

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

DP

CHEVRON USA INC
Operator

Felix Trevino
Signature

Felix TREVINO - PROD. Specialist
Printed Name Title

4-26-90 397-4778

OIL CONSERVATION DIVISION

Date Approved APR 30 1990

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title