

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Chevron</u>		Lease <u>EUNICE KING</u>		Well No. <u>13</u>	
Location of Well	Unit <u>A</u>	Sec. <u>28</u>	Twp <u>21</u>	Range <u>37</u>	County <u>LEA</u>
	Name of Reservoir or Pool		Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Lb. or Csg)
Upper Compl	<u>BLUEBAY</u>		<u>GAS</u>	<u>Flow</u>	<u>Tbg</u>
Lower Compl	<u>1466</u>		<u>GAS</u>	<u>Flow</u>	<u>Tbg</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11-20-96

Well opened at (hour, date): 11-21-96

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>130</u>	<u>155</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>130</u>	<u>150</u>
Minimum pressure during test.....	<u>20</u>	<u>150</u>
Pressure at conclusion of test.....	<u>20</u>	<u>155</u>
Pressure change during test (Maximum minus Minimum).....	<u>110</u>	<u>SAME</u>
Was pressure change an increase or a decrease?.....	<u>Decrease</u>	<u>0</u>
Well closed at (hour, date):	Total Time On Production	
Oil Production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	
Remarks _____		

FLOW TEST NO. 2

Well opened at (hour, date): _____

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>20</u>	<u>155</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>20</u>	<u>155</u>
Minimum pressure during test.....	<u>20</u>	<u>40</u>
Pressure at conclusion of test.....	<u>SAME</u>	<u>40</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>115</u>
Was pressure change an increase or a decrease?.....		<u>Decrease</u>
Well closed at (hour, date):	Total time on Production	
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	
Remarks <u>BOTH ZONES OPEN @ CONCLUSION</u>		

OPERATOR CERTIFICATE OF COMPLIANCE

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

Chevron USA, INC.

Operator

AL. ALEXANDER

Signature

AL. ALEXANDER

Printed Name

11-26-96

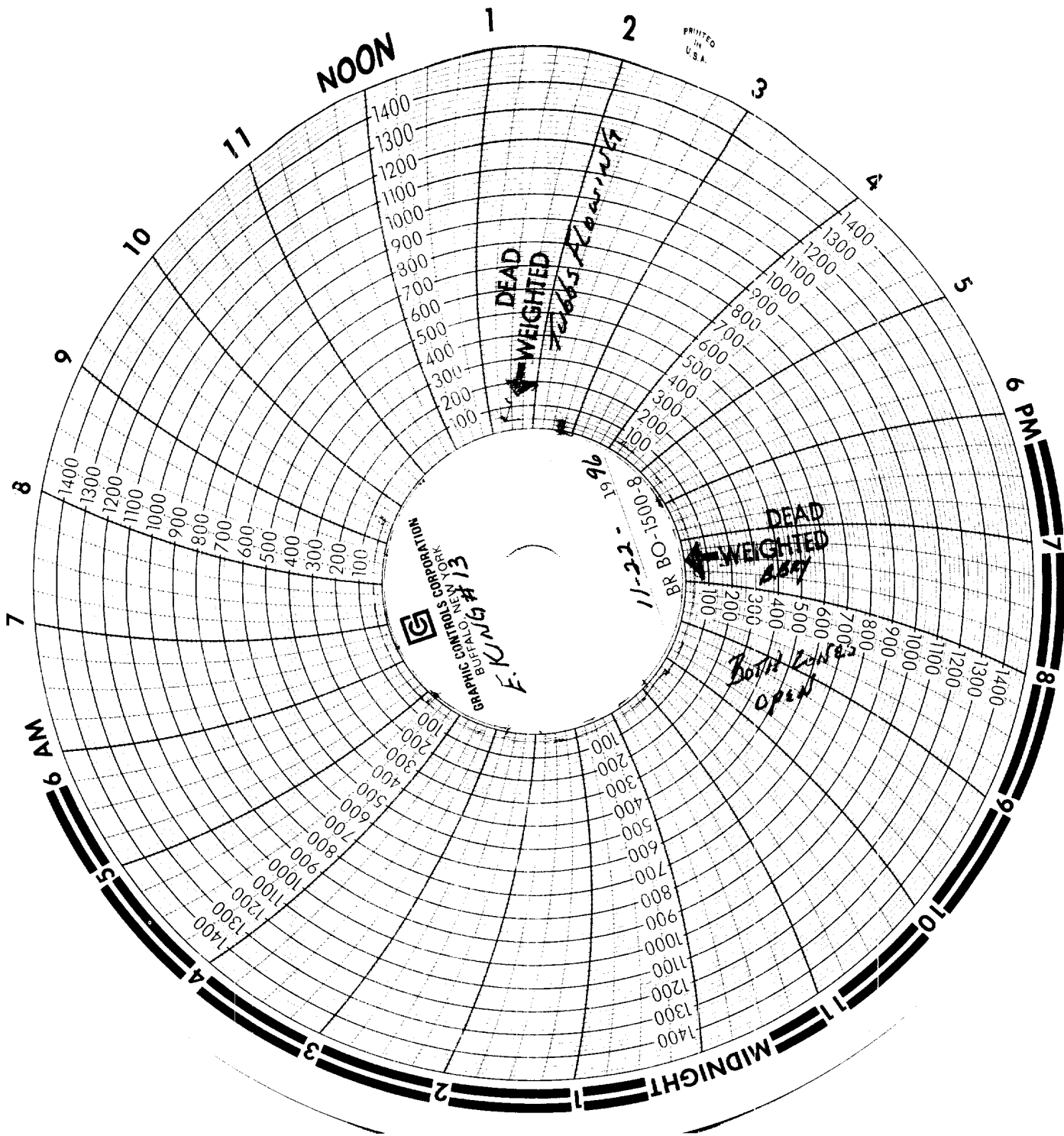
PRODUCTION
SPECIALIST

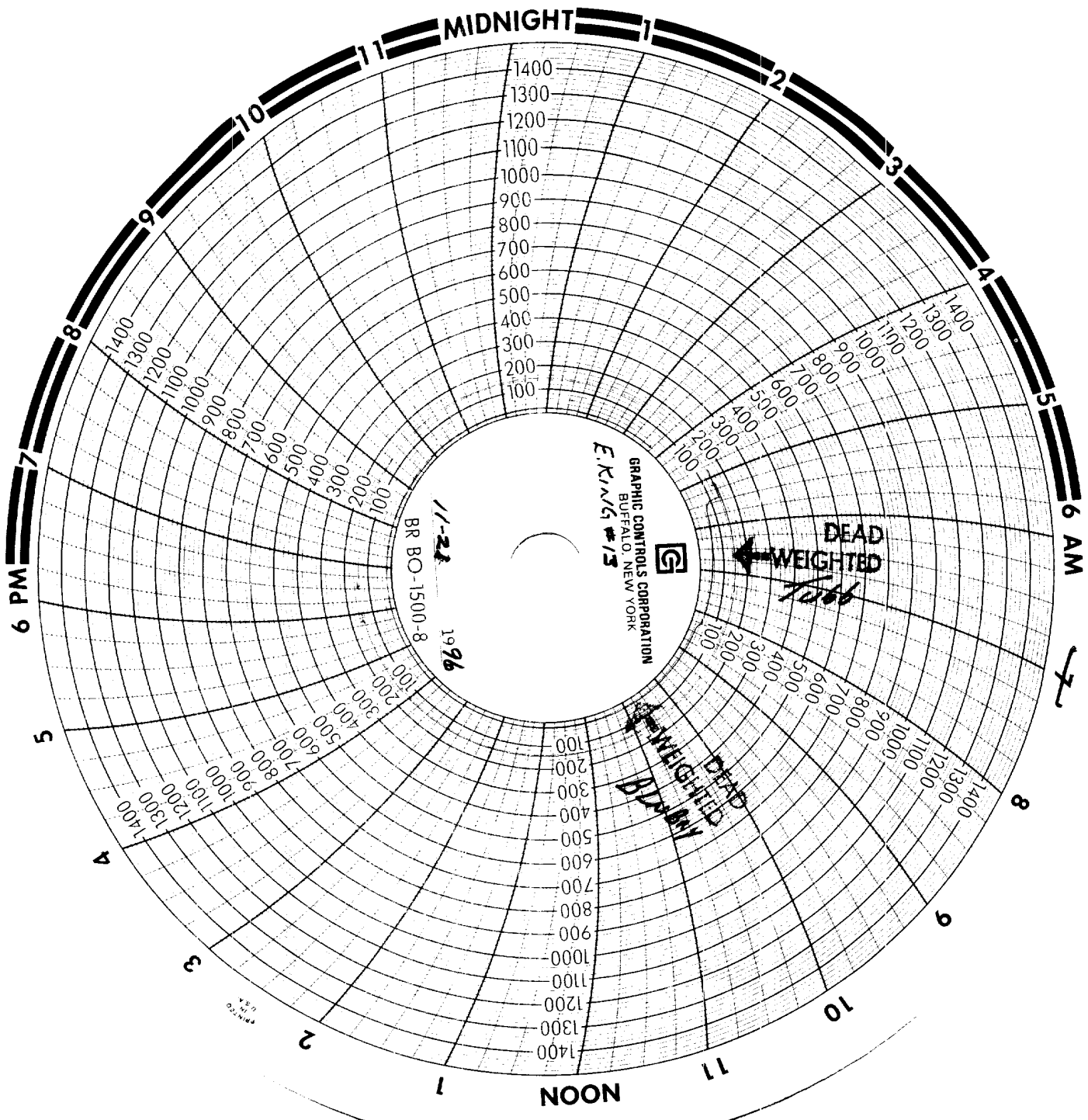
OIL CONSERVATION DIVISION

Date Approved DEC 10 1996

By

Title





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