

STRICT I
O. Box 1980, Hobbs, NM 88240

STRICT II
O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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>CHEVRON USA INC</u>			Lease <u>EUNIA KANG</u>			Well No. <u>13</u>		
Location of Well		Unit <u>A</u>	Sec. <u>28</u>	Twp <u>21</u>	Rge <u>32</u>	County <u>LEA</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>LINEAR</u>				<u>GAS</u>	<u>Flow</u>	<u>TBG</u>		<u>2"</u>
Lower Compl <u>Tubg</u>				<u>GAS</u>	<u>Flow</u>	<u>TBG</u>		<u>2"</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): <u>09-21-94 10:15 AM</u>	Upper Completion	Lower Completion
Well opened at (hour, date): <u>09-22-94 10:20 AM</u>		
Indicate by (X) the zone producing.....	<u>✓</u>	
Pressure at beginning of test.....	<u>190</u>	<u>120</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>190</u>	<u>120</u>
Minimum pressure during test.....	<u>50</u>	<u>120</u>
Pressure at conclusion of test.....	<u>50</u>	<u>120</u>
Pressure change during test (Maximum minus Minimum).....	<u>140</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>SAME</u>
Well closed at (hour, date): <u>9-23-94 10:20 AM</u>	Total Time On Production <u>24 HRS</u>	
Oil Production During Test: <u>1</u> bbls; Grav. _____	Gas Production During Test <u>375</u>	MCF; GOR _____

Remarks _____		
FLOW TEST NO. 2		
Well opened at (hour, date): <u>09-23-94</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>✓</u>
Pressure at beginning of test.....	<u>205</u>	<u>120</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>205</u>	<u>120</u>
Minimum pressure during test.....	<u>205</u>	<u>20</u>
Pressure at conclusion of test.....	<u>205</u>	<u>20</u>
Pressure change during test (Maximum minus Minimum).....	<u>15</u>	<u>100</u>
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>DECREASE</u>
Well closed at (hour, date) <u>09-24-94</u>	Total time on Production <u>24 HRS</u>	
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test <u>42.0</u>	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

CHEVRON USA INC.

Operator C. L. Alexander
Signature

A. L. ALEXANDER prod-Spec
Printed Name Title

10-03-94 397-8770-229

OIL CONSERVATION DIVISION

OCT 14 1994

Date Approved _____

By ORIGINAL SIGNATURE
Signature

Title _____

RECEIVED

OCT 05 1994

OFFICE