

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

OIL CONSERVATION DIVISION

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

This form is not to be used for reporting packer leakage tests in Northwest New Mexico

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>CHEVRON USA INC</u>			Lease <u>J.N. CARSON'S ACT "A"</u>			Well No. <u>9</u>		
Location of Well	Unit <u>K</u>	Sec. <u>28</u>	Twp <u>21S</u>	Rge <u>37E</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>BLUEBAY</u>		<u>GAS</u>	<u>FLOW</u>	<u>TBG.</u>		<u>---</u>	
Lower Compl	<u>TUBB</u>		<u>GAS</u>	<u>FLOW</u>	<u>TBG.</u>		<u>---</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:15 AM 9-21-94

Well opened at (hour, date): 9-22-94

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		☒
Pressure at beginning of test.....	<u>135</u>	<u>225</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>135</u>	<u>225</u>
Minimum pressure during test.....	<u>135</u>	<u>35</u>
Pressure at conclusion of test.....	<u>135</u>	<u>35</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>190</u>
Was pressure change an increase or a decrease?.....	<u>SAME</u>	<u>DECREASE</u>

Well closed at (hour, date): 9-23-94 Total Time On Production 24 HRS

Oil Production _____ Gas Production _____

During Test: 0 bbls; Grav. _____ During Test 340 MCF; GOR _____

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): 9-24-94

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	☒	
Pressure at beginning of test.....	<u>135</u>	<u>235</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>135</u>	<u>235</u>
Minimum pressure during test.....	<u>50</u>	<u>235</u>
Pressure at conclusion of test.....	<u>50</u>	<u>235</u>
Pressure change during test (Maximum minus Minimum).....	<u>85</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>SAME</u>

Well closed at (hour, date): 9-25-94 Total time on Production _____

Oil production _____ Gas Production _____

During Test: 0 bbls; Grav. _____ During Test 414 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 A.L. Alexander

Signature

A.L. ALEXANDER Prod Spec

Printed Name

Title

10-03-94 397-8776-229

OIL CONSERVATION DIVISION

Date Approved OCT 14 1994

By Jerry Seft

Title _____

REC-1000

OCT 05 1994

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