

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>Dayx - V. Linam</u>			Well No. <u>2</u>		
Location of Well			Unit <u>B</u>			Sec. <u>29</u>		
Twp <u>21</u>			Rge <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 (Tbg. or Csg)			Choke Size					
Upper Compl <u>Panrose Skelly - Grayburg</u>			<u>Oil</u>			<u>Pump</u>		
Lower Compl <u>DRINKARD</u>			<u>Oil</u>			<u>Pump</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 Am 2/12/90

Well opened at (hour, date): 9:00 Am 2/13/90

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>20</u>	<u>220</u>
Stabilized? (Yes or No).....	<u>Yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>35</u>	<u>220</u>
Minimum pressure during test.....	<u>20</u>	<u>80</u>
Pressure at conclusion of test.....	<u>35</u>	<u>80</u>
Pressure change during test (Maximum minus Minimum).....	<u>+15</u>	<u>-140</u>
Was pressure change an increase or a decrease?.....	<u>increase</u>	<u>decrease</u>
Well closed at (hour, date): <u>9:00 Am 2/14/90</u>	Total Time On Production <u>24 hrs</u>	
Oil Production	Gas Production	
During Test: <u> </u> bbls; Grav. <u> </u>	During Test <u> </u> MCF; GOR <u> </u>	
Remarks <u>Well head Leak on Lower Compl. side - could not be made to hold.</u>		

FLOW TEST NO. 2

Well opened at (hour, date): 9:00 Am 2/15/90

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>35</u>	<u>75</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>35</u>	<u>75</u>
Minimum pressure during test.....	<u>35</u>	<u>35</u>
Pressure at conclusion of test.....	<u>35</u>	<u>35</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>-40</u>
Was pressure change an increase or a decrease?.....	<u>No change</u>	<u>decrease</u>
Well closed at (hour, date): <u>9:00 Am 2/16/90</u>	Total time on Production <u>24 hrs</u>	
Oil production	Gas Production	
During Test: <u> </u> bbls; Grav. <u> </u>	During Test <u> </u> MCF; GOR <u> </u>	
Remarks <u> </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

Signature

Jw Harbison

Printed Name

2/12/90

Production Specialist

Title

294-7122

OIL CONSERVATION DIVISION

MAR 14 1990

Date Approved

By

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title