Appropriate Dist. Office

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

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

Energy, Minerals and Natural Resources Department

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

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.				Harry Leonard (NCT-D)		3
Location of Well	Unit	Sec.	Twp	Rge	County	
	K	3	22	36	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	Jalmat	Gas	Flow	Csg	—
Lower Compl	Eunice 7 Rivers Queen 50.	Oil	standing	Tbg	—

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 Am 8/14/91

Well opened at (hour, date): 9:00 Am 8/15/91

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	135	0
Stabilized? (Yes or No)	Yes	yes
Maximum pressure during test	135	0
Minimum pressure during test	76	0
Pressure at conclusion of test	76	0
Pressure change during test (Maximum minus Minimum)	-59	0
Was pressure change an increase or a decrease?	decrease	

Well closed at (hour, date): 9:00 Am 8/16/91 Total Time On Production 24 hrs

Oil Production During Test: _____ bbls; Grav. _____ Gas Production During Test _____ MCF; GOR _____

Remarks Lower zone is standing

FLOW TEST NO. 2

Well opened at (hour, date): _____

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		
Pressure at beginning of test		
Stabilized? (Yes or No)	yes	yes
Maximum pressure during test		
Minimum pressure during test		
Pressure at conclusion of test		
Pressure change during test (Maximum minus Minimum)		
Was pressure change an increase or a decrease?		

Well closed at (hour, date) _____ Total time on Production 24 hrs

Oil production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ 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

JW Harbison
Signature

JW Harbison Production Specialist
Printed Name Title

8/16/91 394-3133

DP

OIL CONSERVATION DIVISION

Date Approved 8/26/1991

By _____

Title _____