Submit 3 Copies to Appropriate Dist. Office

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Revised 1-1-89

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.
James L. Evans P.O. Box 1029 Eunice, NM 88231			Gulf State		1
Location of Well: Unit	Sec.	Twp	Rge	County	
V	1	21S	35E	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	Eumont Yates	Gas	Flow	Csg.	3/4"
Lower Compl	Eumont Queen	Oil	Pump	Tbg.	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00AM 3/23/94

Well opened at (hour, date): 9:00AM 3/24/94

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		X
Pressure at beginning of test	70	20
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	75	30
Minimum pressure during test	70	20
Pressure at conclusion of test	75	30
Pressure change during test (Maximum minus Minimum)	5	10
Was pressure change an increase or a decrease?	INCREASE	INCREASE

Well closed at (hour, date): 9:00AM 3/25/94 Total Time On Production: 24 HOURS

Oil Production During Test: 2 bbls; Grav. 35 Gas Production During Test: 6.5 MCF; GOR: 3250/1

Remarks:

FLOW TEST NO. 2

Well opened at (hour, date): 9:00AM 3/26/94

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	75	30
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	75	30
Minimum pressure during test	40	25
Pressure at conclusion of test	40	25
Pressure change during test (Maximum minus Minimum)	35	5
Was pressure change an increase or a decrease?	DECREASE	DECREASE

Well closed at (hour, date): 9:00AM 3/27/94 Total time on Production: 24 HOURS

Oil production During Test: 0 bbls; Grav.: ; Gas Production During Test: 25 MCF; GOR:

Remarks: Graph on reverse.

OPERATOR CERTIFICATE OF COMPLIANCE

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

James L. Evans
Operator

James L. Evans
Signature

James L. Evans — Operator
Printed Name — Title

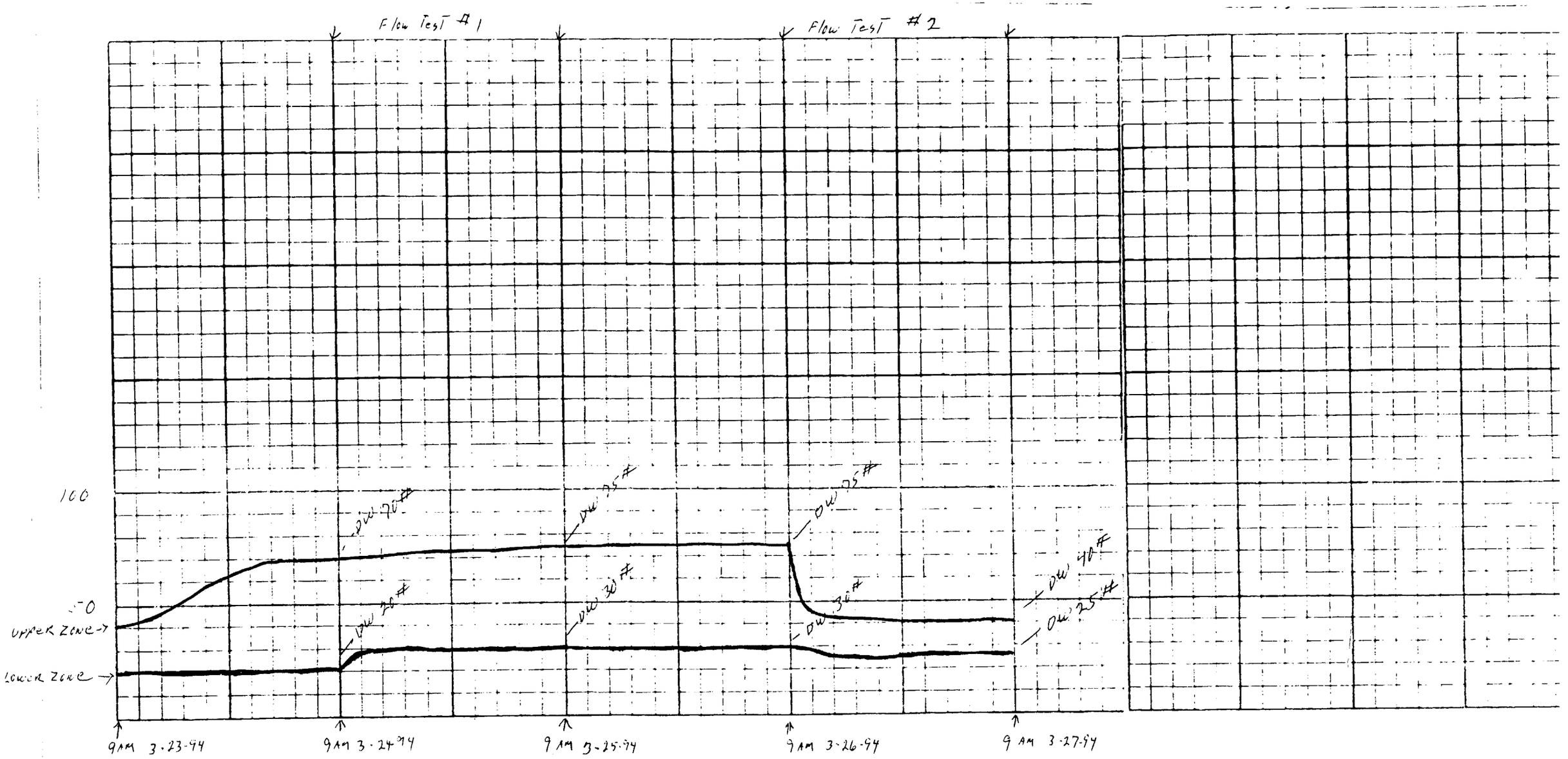
4/8/94 — (505)394-3748
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved: APR 15 1994

By: ORIGINAL SIGNED BY JERRY SEXTON

Title: DISTRICT I SUPERVISOR


Flow Test #1
Flow Test #2
100
50
Upper Zone
Lower Zone
DW 70#
DW 75#
DW 75#
DW 40#
DW 30#
DW 30#
DW 35#
DW 25#
9AM 3-23-94
9AM 3-24-94
9AM 3-25-94
9AM 3-26-94
9AM 3-27-94