

CHEVRON U.S.A. INC.

DISPOSAL/INJECTION WELL  
PRESSURE TEST REPORT  
NEW MEXICO

1. LEASE NAME: Eunice Monument South Unit
2. WELL NO.: 195
3. LOCATION: UNIT H SEC 6 T 21S R 36E
4. COUNTY: lea
5. REASON FOR TEST: ☐ INITIAL TEST PRIOR TO INJECTION  
☒ AFTER WORKOVER  
☐ FIVE YEAR TEST  
☐ OTHER (SPECIFY) \_\_\_\_\_
6. DATE OF TEST: 9/27/99
7. TEST PRESSURE:
- |         | <u>TIME</u> | <u>TUBING</u> | <u>CASING</u> | <u>SURFACE<br/>CASING</u> |
|---------|-------------|---------------|---------------|---------------------------|
| INITIAL | <u>0</u>    | <u>320</u>    | <u>0</u>      |                           |
| 15 MIN. | <u>0</u>    | <u>300</u>    | <u>0</u>      |                           |
| 30 MIN. | _____       | _____         | _____         |                           |
| _____   | _____       | _____         | _____         |                           |
| _____   | _____       | _____         | _____         |                           |
8. TEST WITNESSED BY OCD: ☐ YES ☒ NO  
IF YES, NAME OF OCD REP. \_\_\_\_\_
9. OPERATOR COMMENTS ON TEST: \_\_\_\_\_
10. WELL STATUS: \_\_\_\_\_  
☒ ACTIVE ☐ TEMPORARILY ABANDONED ☐ OTHER (SPECIFY) \_\_\_\_\_
11. CHEVRON REPRESENTATIVE: M. D. DUNCAN Operation Supv.  
NAME TITLE  
M. D. Duncan  
SIGNATURE