ATTN: BONNIE @ OCD

TUBING SIZE 2 3/8
PKR. SETTING DEPTH _____
PERFS TOP & BOTTOM _____

CHEVRON U.S.A. PRODUCTION CO.

DISPOSAL / INJECTION WELL
PRESSURE TEST REPORT
NEW MEXICO

1. LEASE NAME: AGU
2. WELL NO. 139
3. LOCATION: UNIT: O SEC. 35 T 21 R 36
4. COUNTY: LEA
5. REASON FOR TEST:
   - X INITIAL TEST PRIOR TO INJECTION.
   - _____ AFTER WORKOVER
   - _____ FIVE YEAR TEST
   - _____ OTHER (SPECIFY) _____
6. DATE OF TEST: 8-14-92
7. TEST PRESSURE:

TIME:	TUBING	CASING	SURFACE CASING
INITIAL	—	600	600
15 MIN.	—	600	—
30 MIN.	—	600	—
_____			
_____			

8. TEST WITNESSED BY OCD: _____ YES X NO
   IF YES, NAME OF OCD REP. _____
9. OPERATOR COMMENTS ON TEST: _____
10. WELL STATUS:
    X ACTIVE _____ TEMPORARILY ABANDONED _____ OTHER (SPECIFY) ____
11. CHEVRON REPRESENTATIVE: Fred ORTIZ (NAME) DRLG. REP. (TITLE)

R. Matthews for F. ORTIZ
SIGNATURE