

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 John H. Hendrix Corporation			Lease Brunson C			Well No. 7	
Location of Well	Unit P	Sec. 3	Twp 22	Rge 37	County 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	Blinebry		Gas	Flow	Csg	25/64	
Lower Compl	Drinkard		Gas	Pump	Tbg	Open	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 6:00 AM 2/02/02

	Upper Completion	Lower Completion
Well opened at (hour, date): 12:00 PM 2/02/02		
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	240	50
Stabilized? (Yes or No).....	yes	yes
Maximum pressure during test.....	240	70
Minimum pressure during test.....	50	50
Pressure at conclusion of test.....	50	70
Pressure change during test (Maximum minus Minimum).....	190	20
Was pressure change an increase or a decrease?.....	Decrease	Increase
Well closed at (hour, date): 6:00 PM 2/02/02	Total Time On Production 6 hours	
Oil Production During Test: 1/2 bbls; Grav. 42	Gas Production During Test 100 MCF; GOR 200,000	
Remarks No evidence of communication		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): 6:00 AM 2/03/02		
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	280	80
Stabilized? (Yes or No).....	yes	yes
Maximum pressure during test.....	305	80
Minimum pressure during test.....	280	40
Pressure at conclusion of test.....	305	40
Pressure change during test (Maximum minus Minimum).....	25	40
Was pressure change an increase or a decrease?.....	Increase	Decrease
Well closed at (hour, date) 12:00 PM 2/03/02	Total time on Production 6 hours	
Oil production During Test: 3 bbls; Grav. 42	Gas Production During Test 1 MCF; GOR 330	
Remarks No evidence of communication		

OPERATOR CERTIFICATE OF COMPLIANCE

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

John H. Hendrix Corporation

Operator

Signature

Marvin Burrows-Production Supt.

Printed Name

Title

3-7-02

Date

394-2649

Telephone No.

OIL CONSERVATION DIVISION

Date Approved 3/12/02

By

Lang W. Wink

OC FIELD REPRESENTATIVE / STAFF MANAGER

Title