

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Chevron USA, Inc.</u>			Lease <u>MARK</u>			Well No. <u>3</u>		
Location of Well	Unit <u>G</u>	Sec. <u>3</u>	Twp <u>22</u>	Rge <u>37</u>	County <u>Lea</u>			
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	<u>Blinberry</u>		<u>Gas</u>	<u>Flow</u>	<u>Tbg</u>	<u>2" w.o</u>		
Lower Compl	<u>DRINKARD</u>		<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:00 A 3/12/90

Well opened at (hour, date): 10:00 Am 3/13/90

Indicate by (X) the zone producing.....

Pressure at beginning of test.....

Stabilized? (Yes or No).....

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): 10:00 Am 3/14/90

Oil Production During Test: _____ bbls; Grav. _____

Gas Production During Test _____

Total Time On Production 24 hrs

MCF; GOR _____

Remarks _____

	Upper Completion	Lower Completion
		<u>X</u>
	<u>35</u>	<u>150</u>
	<u>yes</u>	<u>yes</u>
	<u>45</u>	<u>150</u>
	<u>35</u>	<u>60</u>
	<u>45</u>	<u>60</u>
	<u>+10</u>	<u>-90</u>
	<u>increase</u>	<u>decrease</u>

FLOW TEST NO. 2

Well opened at (hour, date): 10:00 Am 3/15/90

Indicate by (X) the zone producing.....

Pressure at beginning of test.....

Stabilized? (Yes or No).....

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): 10:00 Am 3/16/90

Oil production During Test: _____ bbls; Grav. _____

Gas Production During Test _____

Total time on Production 24 hrs

MCF; GOR _____

Remarks _____

	Upper Completion	Lower Completion
	<u>X</u>	
	<u>55</u>	<u>150</u>
	<u>yes</u>	<u>yes</u>
	<u>55</u>	<u>155</u>
	<u>30</u>	<u>150</u>
	<u>30</u>	<u>155</u>
	<u>-25</u>	<u>+5</u>
	<u>decrease</u>	<u>increase</u>

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
Printed Name

Production Specialist
Title

OIL CONSERVATION DIVISION

Date Approved APR 6 1990

By ORIGINAL SIGNED BY JERRY CEXTON
DISTRICT I SUPERVISOR

Title _____







