

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

OIL CONSERVATION DIVISION

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

INSTRUCTIONS ON REVERSE
SIDE

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

This form is not to be used for
reporting packer leakage tests in
Northwest New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Chevron USA, Inc.</u>			Lease <u>AL Christmas (NCT-C)</u>			Well No. <u>7</u>		
Location of Well	Unit <u>H</u>	Sec. <u>18</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>Eumont</u>		<u>Oil</u>	<u>Pump</u>	<u>Tbg</u>	<u>—</u>		
Lower Compl	<u>Arrowhead-GB</u>		<u>Oil</u>	<u>Standing</u>	<u>Tbg</u>	<u>—</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 A.M. 5/8/89

Well opened at (hour, date): 9:30 A.M. 5/9/89

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>60</u>	<u>30</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>60</u>	<u>30</u>
Minimum pressure during test.....	<u>60</u>	<u>30</u>
Pressure at conclusion of test.....	<u>60</u>	<u>30</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>No change</u>	<u>No change</u>
Well closed at (hour, date): <u>9:30 A.M. 5/10/89</u>	Total Time On Production <u>24 hrs</u>	
Oil Production	Gas Production	
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____	
Remarks <u>Lower zone is standing</u>		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): _____		
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
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) _____	Total time on Production <u>24 hrs</u>	
Oil production	Gas Production	
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____	
Remarks _____		

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: _____
Signature J.W. Harbison
Printed Name J.W. Harbison Title Production Specialist

OIL CONSERVATION DIVISION

MAY 25 1989

Date Approved _____
By _____
Title _____
Orig. Signed by Paul Kautz
Geologist