

Operator <u>Chevron USA, Inc.</u>				Lease <u>Cutman</u>			Well No. <u>1</u>	
Location of Well		Unit <u>N</u>	Sec <u>19</u>	Twp <u>22</u>	Rge <u>38</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>Blincery</u>				<u>Gas</u>	<u>Flow</u>	<u>Csg</u>	<u>2" wo</u>	
Lower Compl <u>Tubb</u>				<u>"</u>	<u>"</u>	<u>Tbg</u>	<u>"</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:30 Am 10/20/86

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>8:30 Am 10/20/86</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>300</u>	<u>361</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>300</u>	<u>368</u>
Minimum pressure during test.....	<u>80</u>	<u>361</u>
Pressure at conclusion of test.....	<u>80</u>	<u>368</u>
Pressure change during test (Maximum minus Minimum).....	<u>-220</u>	<u>+7</u>
Was pressure change an increase or a decrease?.....	<u>decrease</u>	<u>increase</u>
Well closed at (hour, date): <u>8:30 Am 10/22/86</u>	Total Time On Production <u>24 hrs</u>	
Oil Production	Gas Production	
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____	
Remarks _____		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>8:30 Am 10/23/86</u>		
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>310</u>	<u>370</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>432</u>	<u>370</u>
Minimum pressure during test.....	<u>310</u>	<u>262</u>
Pressure at conclusion of test.....	<u>432</u>	<u>262</u>
Pressure change during test (Maximum minus Minimum).....	<u>+122</u>	<u>-108</u>
Was pressure change an increase or a decrease?.....	<u>increase</u>	<u>decrease</u>
Well closed at (hour, date): <u>8:30 Am 10/24/86</u>	Total time on Production <u>24 hrs</u>	
Oil Production	Gas Production	
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____	
REMARKS: _____		

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

Approved: NOV 5 1986
Oil Conservation DivisionORIGINAL SIGNED BY JERRY SEXTON
NORTHWEST NEW MEXICOOperator Chevron USA, Inc.By Jr. HachewTitle Production Specialist

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