ENERGY AND MINERALS DEPARTMENT

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator		Lease		Well No.
Chevron USA, Inc.		Scarborough Estate		1

Location of Well	Unit	Sec	Twp	Rge	County
	A	31	~~32~~ 22	38	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	Oil	Standing	Csg	—
Lower Compl	~~Drinkard~~	"	Flow	Tbg	—

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 1:00 pm 2/16/87

	Upper Completion	Lower Completion
Well opened at (hour, date): 1:00 pm 2/17/87		
Indicate by (X) the zone producing		X
Pressure at beginning of test	0	768
Stabilized? (Yes or No)	Y	Y
Maximum pressure during test	0	368
Minimum pressure during test	0	36
Pressure at conclusion of test	0	36
Pressure change during test (Maximum minus Minimum)	0	-732
Was pressure change an increase or a decrease?	No change	decrease

Well closed at (hour, date): 1:00 pm 2/18/87 Total Time On Production 24 hrs

Oil Production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ MCF; GOR _____

Remarks: Upper zone is standing

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)		
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 24 hrs

Oil Production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ MCF; GOR _____

REMARKS: _____

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

Approved: MAR 27 1987 19__

Oil Conservation Division

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

By _____

Operator Chevron USA Inc.

By J. Hanlon

Title Production Specialist