



Operator TEXACO INC.			Lease NEW MEXICO 'BZ' STATE NCT-10			Well No. 1
Section Well	Unit K	Loc 2	Dep 25s	Acc 37E	County LEA	
Name of Reservoir or Pool			Type of Prod (Oil or Gas)	Method of Prod Flow, Art Lift	Prod. Medium (Oil or Gas)	Choke Size
Upper Zone	JUSTIS BLINERBY		OIL	ART LIFT	CSG 2 7/8"	2"
Lower Zone	JUSTIS DEVONIAN, NORTH		SWD	* INJECTION	TBG 1 1/2"	~

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:30 2-11-85

Well opened at (hour, date): 8:30 2-12-85

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>630</u>	<u>375</u>
Stabilized? (Yes or No).....	<u>No</u>	<u>No</u>
Maximum pressure during test.....	<u>640</u>	<u>675</u>
Minimum pressure during test.....	<u>630</u>	<u>375</u>
Pressure at conclusion of test.....	<u>640</u>	<u>675</u>
Pressure change during test (Maximum minus Minimum).....	<u>+ 10</u>	<u>+ 300</u>
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>INCREASE</u>

Well closed at (hour, date): 12:30 pm 2-12-85

Oil Production _____ Gas Production _____

During Test: ~ bbls; Grav. ~; During Test ~ MCF; GOR ~

Remarks * INJECTION RATE 1450 BPD

FLOW TEST NO. 2

Well opened at (hour, date): 8:30 2-13-85

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>640</u>	<u>400</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>No</u>
Maximum pressure during test.....	<u>640</u>	<u>400</u>
Minimum pressure during test.....	<u>90</u>	<u>380</u>
Pressure at conclusion of test.....	<u>375</u>	<u>380</u>
Pressure change during test (Maximum minus Minimum).....	<u>- 550</u>	<u>- 20</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>DECREASE</u>

Well closed at (hour, date): 8:30 am 2-14-85

Oil Production _____ Gas Production _____

During Test: 12 bbls; Grav. 37.2; During Test 112 MCF; GOR 9333

Remarks JUSTIS BLINERBY ZONE UTILIZES PLUNGER LIFT EQUIPMENT

ANNUAL ZONE SEGREGATION TEST

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

Approved MAR 22 1985 19 _____

Operator TEXACO Inc.

By W.B. G.H.