

NEW MEXICO OIL CONSERVATION COMMISSION
NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

FORM PL-NW-1
REV. 11-1-64

Operator El Paso Natural Gas Company			Well Name and Number Jicarilla 67 #18		
Location of Well Unit I Sec. 19 Twp. 25 Rge. 5		TYPE OF TEST →	Annual - (Give Year) 1983	Initial - (Give Date)	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> OWWO
UPPER COMPLETION	Reservoir or Pool PC	<input checked="" type="checkbox"/> GAS <input type="checkbox"/> OIL	<input checked="" type="checkbox"/> FLOWING <input type="checkbox"/> ARTIFICIAL LIFT	Production String <input checked="" type="checkbox"/> CASING <input type="checkbox"/> TUBING	
LOWER COMPLETION	Reservoir or Pool CH	<input checked="" type="checkbox"/> GAS <input type="checkbox"/> OIL	<input checked="" type="checkbox"/> FLOWING <input type="checkbox"/> ARTIFICIAL LIFT	Production String <input checked="" type="checkbox"/> CASING <input type="checkbox"/> TUBING	

SHUT-IN PRESSURE DATA BEFORE FLOW TEST NO. 1

UPPER COMPLETION	Date Well Shut-In T/A	No. Days Shut-In 1005	Shut-In Pressure - Psig 479		CASING <input type="checkbox"/> TUBING <input type="checkbox"/>	Stabilized Pressure <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
LOWER COMPLETION	Date Well Shut-In T/A	No. Days Shut-In 1005	Shut-In Pressure - Psig 406		CASING <input type="checkbox"/> TUBING <input type="checkbox"/>	Stabilized Pressure <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FLOW TEST NO. 1			Zone Producing <input type="checkbox"/> UPPER <input type="checkbox"/> LOWER		Date Flow Started	
LAPSED TIME SINCE FLOW BEGAN	SHUT-IN ZONE PRESSURES - PSIG		PRODUCING ZONE PRESSURES - PSIG		FLOWING TEMP. °F	REMARKS:
	CASING	TUBING	FLOWING	WORKING		
GAS	MCFD	METER <input type="checkbox"/>	CHOKE <input type="checkbox"/>	OIL	RATE - BBL./D	GRAVITY °API
REMARKS: THIS WELL IS NOT TIED -IN & IS NOT COMMERCIAL						

SHUT-IN PRESSURE DATA BEFORE FLOW TEST NO. 2

UPPER COMPLETION	Date Well Shut-In	No. Days Shut-In	Shut-In Pressure - Psig		CASING <input type="checkbox"/> TUBING <input type="checkbox"/>	Stabilized Pressure <input type="checkbox"/> YES <input type="checkbox"/> NO
LOWER COMPLETION	Date Well Shut-In	No. Days Shut-In	Shut-In Pressure - Psig		CASING <input type="checkbox"/> TUBING <input type="checkbox"/>	Stabilized Pressure <input type="checkbox"/> YES <input type="checkbox"/> NO
FLOW TEST NO. 2			Zone Producing <input type="checkbox"/> UPPER <input type="checkbox"/> LOWER		Date Flow Started	
LAPSED TIME SINCE FLOW BEGAN	PRODUCING ZONE PRESSURES - PSIG		SHUT-IN ZONE PRESSURES - PSIG		FLOWING TEMP. °F	REMARKS:
	FLOWING	WORKING	CASING	TUBING		
GAS	MCFD	METER <input type="checkbox"/>	CHOKE <input type="checkbox"/>	OIL	RATE - BBL./D	GRAVITY °API
REMARKS:						

The results of this test indicate (No Packer Leakage) (Packer Leakage) in this well.

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

APPROVED AUG 1 1983, 19
NEW MEXICO OIL CONSERVATION COMMISSION
Original Signed by CHARLES SNOLSON
BY _____
DEPUTY OIL & GAS INSPECTOR DIST. #3

OPERATOR El Paso Natural Gas Company
BY [Signature]
TITLE _____
DATE July 83, 1983