

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator Consolidated Oil & Gas Inc. Lease Con Hale Well No. 3 PD
Location of Well: Unit A Sec. 26 Twp. 26 Rge. 8 County San Juan

	Name of Reservoir or Pool	Type of Prod.	Method of Prod.	Prod. Medium
		(Oil or Gas)	(Flow or Art. Lift)	(Tbg. or Csg.)
Upper Completion	Pictured Cliffs	Gas	Flow	tubing
Lower Completion	Dakota	Gas	TA	tubing

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Compl	Hour, date Shut-in	4-30-77	Length of time shut-in	3 days	SI press. psig	195	Stabilized? (Yes or No)
Lower Compl	Hour, date Shut-in	TA	Length of time shut-in	TA	SI press. psig	70	Stabilized? (Yes or No)

FLOW TEST NO. 1

Commenced at (hour, date)*				Zone producing (Upper or Lower):	
Time (hour, date)	Lapsed time since*	Pressure		Prod. Zone Temp.	Remarks
		Upper Compl.	Lower Compl.		
5-1-77	1 day	70	195		
5-2-77	2 days	70	195		
5-3-77	3 days	70	195		
	1 hour	0	195		Open Upper Zone
	2 hours	0	195		
	3 hours	0	195		

Production rate during test
Oil: _____ BOPD based on _____ Bbls. in _____ Hrs. _____ Grav. _____ GOR _____
Gas: 0 MCFPD; Tested thru (Orifice or Meter): _____ Choke _____

MID-TEST SHUT-IN PRESSURE DATA

Upper Compl	Hour, date Shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)
Lower Compl	Hour, date Shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)

FLOW TEST NO. 2

Commenced at (hour, date)**				Zone producing (Upper or Lower):	
Time (hour, date)	Lapsed time since **	Pressure		Prod. Zone Temp.	Remarks
		Upper Compl.	Lower Compl.		

Production rate during test
Oil: _____ BOPD based on _____ Bbls. in _____ Hrs. _____ Grav. _____ GOR _____
Gas: _____ MCFPD; Tested thru (Orifice or Meter): _____

REMARKS: _____

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

Approved: _____ 19 _____
New Mexico Oil Conservation Commission

By H. E. Maxwell

Title _____

Operator Consolidated Oil & Gas Inc.

By Veryl Moore

Title Production Foreman

Date May 19, 1977