

This form is to be used for conducting packer leakage tests in Northwest New Mexico

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator Union Texas Petroleum Corp. Lease Albright Well No. 8-E
Location of Well: Unit 10 Sec. 15 Twp. 29N Rge. 10W 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	<u>Mesa Verde</u>	<u>Gas</u>	<u>Flowing</u>	<u>Tubing</u>
Lower Completion	<u>Sakota</u>	<u>Gas</u>	<u>Flowing</u>	<u>Tubing</u>

PRE-FLOW SHUT-IN PRESSURE DATA

Upper	Hour, date	3:00 A.M.	Length of	SI press.	Stabilized?
Compl	Shut-in	10/29/85	time shut-in	psig	(Yes or No)
			<u>6 days</u>	<u>532</u>	<u>No</u>
Lower	Hour, date	8:00 A.M.	Length of	SI press.	Stabilized?
Compl	Shut-in	10/29/85	time shut-in	psig	(Yes or No)
			<u>6 days</u>	<u>723</u>	<u>No</u>

FLOW TEST NO. 1

Commenced at (hour, date)* 11/5/85 8:00 A.M. Zone producing (Upper or Lower): Lower

Time (hour, date)	Lapsed time since*	Pressure		Prod. Zone Temp.	Remarks
		Upper Compl.	Lower Compl.		
8:00 A.M. 11/3/85	1 day	512	709		
8:00 A.M. 11/4/85	2 days	523	718		
8:00 A.M. 11/5/85	3 days	532	723		
8:00 A.M. 11/6/85	4 days	541	309	67°	
8:00 A.M. 11/7/85	5 days	547	315	67°	

Production rate during test

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

MID-TEST SHUT-IN PRESSURE DATA

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

Oil Conservation Division

Original Signed by CHARLES GHOLSON

By _____

Title _____ OIL & GAS INSPECTOR, DIST. #3

Operator Union Texas Petroleum CorporationBy Barbara NeumanTitle Production TechnicianDate 11/11/85