

MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Type Test ☒ Initial ☐ Annual ☒ Special				Test Date 1-13-83		REC	
Company Amoco Production Company				Connection El Paso Natural Gas Company			
Pool Bloomfield				Formation Chacra		OIL CON. DIV. DIST. 3	
Completion Date 12-29-82		Total Depth 4330		Plug Back TD 4237			
Csg. Size 7.000		Wt. 26		Set At 6.276		Perforations: From 2631 To 2772	
Trq. Size 2.063		Wt. 3.25		Set At 1.751		Perforations: From perf To sub	
Type Well - Single - Bradenhead - G.G. or G.O. Multiple Dual				Packer Set At 3500		Farm or Lease Name Davis Gas Com 'J'	
Producing Thru Tubing		Reservoir Temp. °F		Mean Annual Temp. °F		Baro. Press. - P _a	
L		H		G _g		County San Juan	
				% CO ₂		State New Mexico	
				% N ₂		Prover	
				% H ₂ S		Meter Run	
						Taps	

FLOW DATA							TUBING DATA		CASING DATA		Duration of Flow
NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h _w	Temp. °F	Press. p.s.i.g.	Temp. °F	Press. p.s.i.g.	Temp. °F	
SI	7 Days						770		770		
1.	2.375		.750				82		360		3 hrs
2.											
3.											
4.											
5.											

RATE OF FLOW CALCULATIONS							
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P _m	Flow Temp. Factor Ft.	Gravity Factor F _g	Super Compress. Factor, F _{pv}	Rate of Flow O. Mcfd
1	12.365		94	1.000	.9608	1.008	1126
2.							
3.							
4.							
5.							

NO.	P _t	Temp. °R	T _r	Z	Gas Liquid Hydrocarbon Ratio _____ Mcf/bbl.	A.P.I. Gravity of Liquid Hydrocarbons _____ Deg.	Specific Gravity Separator Gas _____ X X X X X X X X	Specific Gravity Flowing Fluid _____ X X X X X	Critical Pressure _____ P.S.I.A.	Critical Temperature _____ R
1.										
2.										
3.										
4.										
5.										

NO.	P _c	P _c ²	P _w	P _w ²	P _c ² - P _w ²
1	782	611524	372	138384	473140
2					
3					
4					
5					

(1) $\frac{P_c^2}{P_c^2 - P_w^2} = 1.2925$

(2) $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n = 1.2437$

AOF = Q $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n = 1400$

Absolute Open Flow	1400	Mcf/d @ 15.025	Angle of Slope @	Slope, n .85
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Remarks: _____

Approved By: _____	Conducted By: _____	Calculated By: _____	Checked By: _____
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