

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-122
Revised 12-1-55

MULTI-POINT BACK PRESSURE TEST FOR GAS WELLS

Pool Astec Pictured Cliff Formation Pictured Cliff County San Juan
Initial I Annual _____ Special _____ Date of Test 3/20/56
Company El Paso Natural Gas Company Lease Morris Well No. 8-A
Unit I Sec. 22 Twp. 30N Rge. 11W Purchaser El Paso Natural Gas Company
Casing 7 Wt. _____ I.D. _____ Set at 2252 Perf. _____ To _____
Tubing 1 1/4 Wt. 24 I.D. _____ Set at 2275 Perf. _____ To _____
Gas Pay: From 2255 To 2300 L _____ xG .640 -GL _____ Bar.Press. _____
Producing Thru: Casing I Tubing _____ Type Well _____
Date of Completion: _____ Packer _____ Reservoir Temp. _____
Single-Bradenhead-G. G. or G.O. Dual

OBSERVED DATA

Tested Through (Prover) (Choke) (Meter) Choke Type Taps _____

No.	Flow Data					Tubing Data		Casing Data		Duration of Flow Hr.
	(Prover) (Line) Size	(Choke) (Orifice) Size	Press. psig	Diff. h _w	Temp. °F.	Press. psig	Temp. °F.	Press. psig	Temp. °F.	
SI		<u>3/4</u>				<u>649</u>		<u>649</u>		
1.						<u>51</u>		<u>246</u>	<u>61</u>	<u>3 hours</u>
2.										
3.										
4.										
5.										

FLOW CALCULATIONS

No.	Coefficient (24-Hour)	$\sqrt{h_{wpf}}$	Pressure psia	Flow Temp. Factor F _t	Gravity Factor F _g	Compress. Factor F _{pv}	Rate of Flow Q-MCFPD @ 15.025 psia
1.	<u>14.1605</u>		<u>260</u>	<u>0.9990</u>	<u>0.9682</u>	<u>1.024</u>	<u>3647</u>
2.							
3.							
4.							
5.							

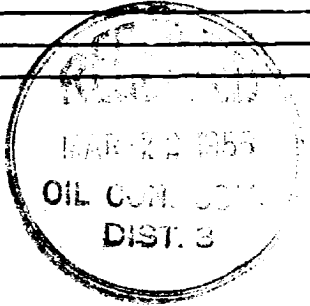
PRESSURE CALCULATIONS

Gas Liquid Hydrocarbon Ratio _____ cf/bbl.
Gravity of Liquid Hydrocarbons _____ deg.
F_c _____ (1-e^{-s})
Specific Gravity Separator Gas _____
Specific Gravity Flowing Fluid _____
P_c _____ P_c² _____

No.	P _w P _t (psia)	P _t ²	F _c Q	(F _c Q) ²	(F _c Q) ² (1-e ^{-s})	P _w ²	P _c ² -P _w ²	Cal. P _w	P _w /P _c
1.									
2.									
3.									
4.									
5.									

Absolute Potential: 1207 MCFPD; n 0.850
COMPANY El Paso Natural Gas Company
ADDRESS P. O. Box 997, Farmington, N.M.
AGENT and TITLE L. D. Galloway, Sr. Gas Engineer
WITNESSED _____
COMPANY _____

REMARKS



OIL CONSERVATION COMMISSION		
APPROPRIATE OFFICE		
No. Copies	2	
DATE		
TO	FROM	
Mr. [illegible]	[illegible]	✓
Mr. [illegible]	[illegible]	
Mr. [illegible]	[illegible]	✓
Mr. [illegible]	[illegible]	✓
Mr. [illegible]	[illegible]	