Submit 3 Copies to Appropriate Dist. Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Revised 1-1-89

INSTRUCTIONS ON REVERSE SIDE

This form is not to be used for reporting packer leakage tests in Northwest New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator			Lease		Well No.
TEXACO EXP + Prod			A H Blinebry Well - 3		1
Location of Well: Unit	Sec.	Twp	Rge		County
D	31	22 S	38 E		LEA

	Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tbg. or Csg)	Choke Size
Upper Compl	Blinebry	OIL	Flow	TBG	1
Lower Compl	Tubbs	GAS	Flow	TBG	1

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 AM 11-5-93

Well opened at (hour, date): 9:00 AM 11-6-93

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	5	0
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	5	0
Minimum pressure during test	5	0
Pressure at conclusion of test	5	0
Pressure change during test (Maximum minus Minimum)	0	0
Was pressure change an increase or a decrease?	NIETHER	NIETHER

Well closed at (hour, date): 9:00 11-7-93 Total Time On Production 24 Hrs

Oil Production During Test: — bbls; Grav. — Gas Production During Test 1 MCF MCF; GOR

Remarks WELL DEAD

FLOW TEST NO. 2

Well opened at (hour, date): 9:00 11-8-93

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		X
Pressure at beginning of test	5	0
Stabilized? (Yes or No)	YES	YES
Maximum pressure during test	5	0
Minimum pressure during test	5	0
Pressure at conclusion of test	5	0
Pressure change during test (Maximum minus Minimum)	0	0
Was pressure change an increase or a decrease?	NIGTHER	NIETHER

Well closed at (hour, date) 9:00 AM 11-9-93 Total time on Production 24 Hrs

Oil production During Test: — bbls; Grav. —; Gas Production During Test — MCF; GOR

Remarks WELL DEAD

OPERATOR CERTIFICATE OF COMPLIANCE

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

TEXACO E & P INC
Operator

F. M. Reynolds
Signature

F. M. REYNOLDS PROD SUPERV.
Printed Name Title

11-9-93 505-394-2585
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 16 1993

By Orig. Signed by Paul Kautz Geologist

Title