

OIL CONSERVATION DIVISION
NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator: AMOCO PRODUCTION COMPANY Lease/Well #: MUDGE B 001A
Meter #: 97556 RTU: - - County: SAN JUAN

RFE

	NAME RESERVOIR OR POOL	TYPE PROD	METHOD PROD	MEDIUM PROD
UPR COMP	MUDGE B 001A APC 90812 (97556)	GAS	FLOW	TBG
LWR COMP	MUDGE B 001A BMV 9081 (97556)	GAS	FLOW	TBG

PRE-FLOW SHUT-IN PRESSURE DATA

	Hour/Date Shut-In	Length of Time Shut-In	SI Press. PSIG	Stabilized
UPR COMP	10/07/95	72	367	yes
LWR COMP	10/07/95	72	347	yes

FLOW TEST DATE NO. 1

Commenced at (hour, date) *				Zone Producing (Upr/Lwr)	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE		Prod Temp.	REMARKS
		Upper	Lower		
10/07/95	Day 1	302	316		Both Zones SI
10/08/95	Day 2	348	348		Both Zones SI
10/09/95	Day 3	363	340		Both Zones SI
10/10/95	Day 4	367	347		flowed lower zone
10/11/95	Day 5	367	345		
10/12/95	Day 6	370	338		

Production rate during test
Oil: _____ BOPD based on _____ BBLs in _____ Hrs _____ Grav _____ GOR _____
Gas: _____ MFCPD: Tested thru (Orifice or Meter): METER
MID-TEST SHUT-IN PRESSURE DATA

	Hour, Date SI	Length of Time SI	SI Press. PSIG	Stabilized (yes/no)
UPR COMP				
LWR COMP				

(Continue on reverse side)

RECEIVED
OCT 30 1995
OIL CONSERVATION DIVISION

FLOW TEST NO. 2

Commenced at (hour, date) @

TIME (hour, date)	LAPSED TIME SINCE @	PRESSURE		Zones producing (Upper or Lower)	REMARKS
		Upper Completion	Lower Completion		

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours. _____ 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 Division
By _____
Title _____
DEPUTY OIL & GAS INSPECTOR

Operator _____
By _____
Title _____
Date _____

NORTHWEST NEW MEXICO PACKER LEAKAGE TEST INSTRUCTIONS

1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such tests shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.
2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.
3. The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized, provided however, that they need not remain shut-in more than seven days.
4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in. Such test shall be continued for seven days in the case of a gas well and for 24 hours in the case of an oil well. Note: if, on an initial packer leakage test, a gas well is being flowed to the atmosphere due to the lack of a pipeline connection the flow period shall be three hours.
5. Following completion of Flow Test No. 1, the well shall again be shut-in, in accordance with Paragraph 3 above.
6. Flow Test No. 2 shall be conducted even though no leak was indicated during Flow Test No. 1. Procedure for Flow Test No. 2 is to be the same as for Flow Test No. 1 except

that the previously produced zone shall remain shut-in while the zone which was previously shut-in is produced.

7. Pressures for gas-zone tests must be measured on each zone with a deadweight pressure gauge at time intervals as follows: 3 hours test: immediately prior to the beginning of each flow period, at fifteen-minute intervals during the first hour thereof, and at hourly intervals thereafter, including one pressure measurement immediately prior to the conclusion of each flow period. 7-day test: immediately prior to the beginning of each flow period, at least one time during each flow period (at approximately the midway point) and immediately prior to the conclusion of each flow period. Other pressures may be taken as desired, or may be requested on wells which have previously shown questionable test data.

24-hour oil zone test: all pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked at least twice, once at the beginning and once at the end of each test, with a deadweight pressure gauge. If a well is a gas-oil or an oil-gas dual completion, the recording gauge shall be required on the oil zone only, with deadweight pressures as required above being taken on the gas zone.

8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the Area District Office of the New Mexico Oil Conservation Division on Northwest New Mexico Packer Leakage Test Form Series 10-01-78 with all deadweight pressures indicated thereon as well as the flow rates (temperatures (gas zones only) and gravity and GOR (oil zones only).

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB NO. 1004-0135

Expires: November 30, 2000

5. Lease Serial No.
SF - 078096
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement Name and/or No.
8. Well Name and No.
MUDGE B 1A
9. API Well No.
3004523179
10. Field and Pool, or Exploratory Area
BLANCO MV & AZTEC P C
11. County or Parish, and State
SAN JUAN NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well ☐ Oil Well ☒ Gas Well Other

2. Name of Operator
AMOCO PRODUCTION COMPANY

3a. Address P.O. BOX 3092
HOUSTON, TX 77079

3b. Phone No. (include area code)
281.366.4491

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1710FEL 155CFSL

8-21-31-11

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> SUBCOM
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Amoco Production Company request permission to convert the subject well from a dual completion to a single completion and commingle production downhole in the Blanco Mesaverde and Aztec Pictured Cliffs Pools as per the attach procedure. NMOCD Form C-107A is being submitted separately for authority to downhole commingle the Blanco Mesaverde and the Aztec Pictured Cliffs.

Electronic Submission #3168 verified by the BLM Well Information System for AMOCO PRODUCTION COMPANY Sent to the Farmington Field Office
Committed to AFMSS for processing by Maurice Johnson on 03/27/2001

Name (Printed/Typed) MARY CORLEY

Title AUTHORIZED REPRESENTATIVE

Signature

Date 03/22/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

