

THIS FORM IS TO BE
USED FOR REPORTING
PACKER-LEAKAGE TESTS
IN OIL-BEARING AREAS

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator Union Texas Petroleum Corp. Lease Jucilla 'N' Well No. 2
Location _____
Unit N Sec. 3 Twp. 24N Rge. 5W County Rio Arriba
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>Gallup</u>	<u>Gas</u>	<u>Flowing</u>	<u>Tubing</u>
Lower Completion	<u>Dakota</u>	<u>Gas</u>	<u>Flowing</u>	<u>Tubing</u>

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Compl	Hour, date <u>8:00 A.M.</u>	Length of time shut-in <u>3 days</u>	SI press. psig <u>485</u>	Stabilized? (Yes or No) <u>No</u>
Lower Compl	Hour, date <u>8:00 A.M.</u>	Length of time shut-in <u>3 days</u>	SI press. psig <u>938</u>	Stabilized? (Yes or No) <u>No</u>

FLOW TEST NO. 1

Commenced at (hour, date)* 9/12/84 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.		
<u>8:00 A.M.</u>					
<u>9/10/84</u>	<u>1 day</u>	<u>464</u>	<u>929</u>		
<u>8:00 A.M.</u>					
<u>9/11/84</u>	<u>2 days</u>	<u>474</u>	<u>934</u>		
<u>8:00 A.M.</u>					
<u>9/12/84</u>	<u>3 days</u>	<u>485</u>	<u>938</u>		
<u>8:00 A.M.</u>					
<u>9/13/84</u>	<u>4 days</u>	<u>488</u>	<u>376</u>	<u>64°</u>	
<u>8:00 A.M.</u>					
<u>9/14/84</u>	<u>5 days</u>	<u>488</u>	<u>355</u>	<u>64°</u>	

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

RECEIVED
SEP 28 1984
OIL CON. DIV.
DIST. 3

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: SEP 28 1984 19
Oil Conservation Division

Original Signed by CHARLES GHOLSON
DEPUTY OIL & GAS INSPECTOR, DIST. #3

Title _____

Operator Union Texas Petroleum Corp.

By Barbara Norman

Title Production Technician

Date 9/26/84