

THIS FORM IS NOT TO BE
USED FOR REPORTING
PACKER LEAKAGE TESTS
NORTHWEST NEW MEXICO

NEW MEXICO OIL CONSERVATION COMMISSION
NORTHWEST NEW MEXICO PACKER LEAKAGE TEST

Operator El Paso Natural Gas Company				Well Location/Name Turner #1 (PM)			
Location of Well Unit A Sec. 28 Twp. 30 Rge. 9				TYPE OF TEST 1977			
UPPER COMPLETION	PC	☒ GAS	☐ OIL	☒ FLOWING	☐ ARTIFICIAL	☒ Casing	☒ Tubing
LOWER COMPLETION	MV	☒ GAS	☐ OIL	☒ FLOWING	☐ ARTIFICIAL	☐ Casing	☒ Tubing

Date	Upper Zone		Lower Zone		
	Shut-In		Shut-In	Flow Test	
	Casing	Tubing	Tubing	Tubing	Flow Rate
8-8-77	198	198	335		
8-9-77	204	204	349		
8-10-77	207	207	358		
8-11-77	209	209		216	1098
8-12-77	211	211		214	1052

Remarks:



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

APPROVED **SEP 6 1977**
NEW MEXICO OIL CONSERVATION COMMISSION

BY *[Signature]*

OPERATOR **El Paso Natural Gas Company**

BY *C.R. Wagner*

TITLE **Well Test Engineer**

