

Operator <b>El Paso Natural Gas Company</b>			Well Name and Number <b>Howell E #1A</b>		
Location of Well <b>Unit D Sec. 29 Twp. 30 Rge. 8</b>		TYPE OF TEST →	Annual – (Give Year)	Initial – (Give Date)	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> OWWO
UPPER COMPLETION	Reservoir or Pool <b>PC</b>	<input checked="" type="checkbox"/> GAS <input type="checkbox"/> OIL	<input checked="" type="checkbox"/> FLOWING <input type="checkbox"/> ARTIFICIAL LIFT	Production String <input type="checkbox"/> CASING <input checked="" type="checkbox"/> TUBING	
LOWER COMPLETION	Reservoir or Pool <b>MV</b>	<input checked="" type="checkbox"/> GAS <input type="checkbox"/> OIL	<input checked="" type="checkbox"/> FLOWING <input type="checkbox"/> ARTIFICIAL LIFT	Production String <input type="checkbox"/> CASING <input checked="" type="checkbox"/> TUBING	

SHUT-IN PRESSURE DATA BEFORE FLOW TEST NO. 1

UPPER COMPLETION	Date Well Shut-In <b>6-9-85</b>	No. Days Shut-In <b>8</b>	Shut-In Pressure – Psig <b>952</b> CASING <b>952</b> TUBING		Stabilized Pressure <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
LOWER COMPLETION	Date Well Shut-In <b>6-9-85</b>	No. Days Shut-In <b>8</b>	Shut-In Pressure – Psig CASING <b>437</b> TUBING		Stabilized Pressure <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
FLOW TEST NO. 1			Zone Producing <input checked="" type="checkbox"/> UPPER <input type="checkbox"/> LOWER		Date Flow Started <b>6-17-85</b>	
LAPSED TIME SINCE FLOW BEGAN	SHUT-IN ZONE PRESSURES – PSIG		PRODUCING ZONE PRESSURES – PSIG		FLOWING TEMP. °F	REMARKS:
	CASING	TUBING	FLOWING	WORKING		
15 Mins.		437	165	666	47	
30 Mins.		437	118	491	51	
45 Mins.		437	89	399	56	
1 Hr		437	73	318	58	
2 Hrs.		437	41	239	59	
3 Hrs.		437	38	223	60	
GAS <b>583</b> MCFLD METER <input type="checkbox"/> CHOKE <input checked="" type="checkbox"/> OIL RATE – BBL./D GRAVITY ° API						
REMARKS:						

SHUT-IN PRESSURE DATA BEFORE FLOW TEST NO. 2

UPPER COMPLETION	Date Well Shut-In <b>6-17-85</b>	No. Days Shut-In <b>7</b>	Shut-In Pressure – Psig <b>931</b> CASING <b>931</b> TUBING		Stabilized Pressure <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
LOWER COMPLETION	Date Well Shut-In <b>6-9-85</b>	No. Days Shut-In <b>15</b>	Shut-In Pressure – Psig CASING <b>443</b> TUBING		Stabilized Pressure <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
FLOW TEST NO. 2			Zone Producing <input type="checkbox"/> UPPER <input checked="" type="checkbox"/> LOWER		Date Flow Started <b>6-24-85</b>	
LAPSED TIME SINCE FLOW BEGAN	PRODUCING ZONE PRESSURES – PSIG		SHUT-IN ZONE PRESSURES – PSIG		FLOWING TEMP. °F	REMARKS:  <div>RECEIVED JUN 27 1985 OIL CON. DIV. DIST. 3</div>
	FLOWING	WORKING	CASING	TUBING		
15 Mins.	156		934	934	61	
30 Mins.	155		935	935	62	
45 Mins.	154		935	935	63	
1 Hr.	153		935	935	63	
2 Hrs.	151		936	936	64	
3 Hrs.	151		936	936	64	
GAS <b>1910</b> MCFLD METER <input type="checkbox"/> CHOKE <input checked="" type="checkbox"/> OIL RATE – BBL./D GRAVITY ° API						
REMARKS:						

The results of this test indicate (No Packer Leakage) (Packer Leakage) in this well.

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

APPROVED <b>JUN 27 1985</b> 19 NEW MEXICO OIL CONSERVATION COMMISSION Original Signed by <b>CHARLES CHOLSON</b> BY <b>DEPUTY OIL &amp; GAS INSPECTOR, DIST. #3</b>	OPERATOR <b>El Paso Natural Gas</b> BY <b>J.B. Grant</b> TITLE <b>Production Engineer</b> DATE <b>6-26-85</b>
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