

This form is not to  
be used for reporting  
backer leakage tests  
in Southeast New Mexico

NORTHWEST NEW MEXICO BACKER-LEAKAGE TEST

Operator MOI Lease HUALSAKER Well No. 2R  
Location of Well: Unit B Sec. 26 Twp. 31 Rge. 9 County S. J.

	NAME OF RESERVOIR OR POOL	TYPE OF PROD. (Oil or Gas)	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. or Csg.)
Upper Completion	<u>Mesa Verde</u>	<u>GAS</u>	<u>FLOW</u>	<u>Tubing</u>
Lower Completion	<u>DAKOTA</u>	<u>GAS</u>	<u>FLOW</u>	<u>Tubing</u>

PRE-FLOW SHUT-IN PRESSURE DATA

Completion	Hour, date shut-in	Length of time shut-in	St. press. psig	Stabilized? (Yes or No)
Upper Completion	<u>11-5-90</u>	<u>3 DAYS</u>	<u>352</u>	
Lower Completion	<u>11-5-90</u>	<u>3 DAYS</u>	<u>372</u>	

FLOW TEST NO. 1

TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE		Zone producing (Upper or Lower)	PROD. ZONE TEMP.	REMARKS
		Upper Completion	Lower Completion			
<u>11-6-90</u>	<u>1 day</u>	<u>352</u>	<u>372</u>			<u>BOTH ZONES SHUT-IN</u>
<u>11-7-90</u>	<u>2 day</u>	<u>369</u>	<u>389</u>			<u>BOTH ZONES SHUT-IN</u>
<u>11-8-90</u>	<u>3 day</u>	<u>370</u>	<u>390</u>			<u>BOTH ZONES SHUT-IN</u>
<u>11-9-90</u>	<u>1 day</u>	<u>370</u>	<u>219</u>			<u>Lower Zone Flowing</u>
<u>11-10-90</u>	<u>2 day</u>	<u>371</u>	<u>240</u>			<u>Lower Zone Flowing</u>

Production rate during test

Oil: \_\_\_\_\_ BOPD based on \_\_\_\_\_ Bbls. in \_\_\_\_\_ Hours. \_\_\_\_\_ Grav. \_\_\_\_\_ GOR \_\_\_\_\_

Gas: \_\_\_\_\_ MCFPD: Tested thru (Orifice or Meter): \_\_\_\_\_

MID-TEST SHUT-IN PRESSURE DATA

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

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Original Signed by CHARLES GRILSON

DEPUTY OIL & GAS INSPECTOR, DIST. #3

(Continue on reverse side)