

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

NORTHWEST N M PACKER-LEAKAGE TEST

Operator WILLIAMS PRODUCTION COMPANY Lease ROSA UNIT Well No. #139

Location

of Well: Unit C Sec. 17 Twp. 31N Rge. 6 W County SAN JUAN

	NAME OF RESERVOIR OR POOL	TYPE OF PROD (Flow or Art. Lift)	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. or Csg.)
Upper Completion	PICTURED CLIFFS	GAS	FLOWING	TUBING
Lower Completion	MESAVERDE	GAS	FLOWING	TUBING

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Completion	Hour, date shut-in 4-04-97	Length of time shut-in 7 DAYS	SI press. psig 1198 CSG 1198 TBG	Stabilized? (Yes or No) YES
Lower Completion	Hour, date shut-in 4-04-97	Length of time shut-in 7 DAYS	SI press. psig 462 TBG	Stabilized? (Yes or No) YES

FLOW TEST NO. 1

Commenced at (hour, date)* 4-10-97					Zone producing (Upper or Lower) UPPER <u>Lower</u>	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE			PROD. ZONE TEMP.	REMARKS
		Upper Completion		Lower Completion		
		CSG	TBG	TBG		
4-10-97	24 HOUR	1206	1206	380		Q = 0
4-11-97	48 HOUR	1216	1216	369		Q = 0

Remarks: _____

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

Approved JUN 11 1997 19____
New Mexico Oil Conservation Division

By _____
Title _____

Deputy Oil & Gas Inspector

Operator WILLIAMS PRODUCTION COMPANY

By SUSAN GRIGUHN

Title CLERK

Date May 1, 1997