

STATE OF NEW MEXICO
ENERGY and MINERALS DEPARTMENT

I-32-3/N-11W
Location of Well: I32N11W Page 1

OIL CONSERVATION DIVISION
NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator: AMOCO PRODUCTION COMPANY Lease/Well #:HEATON LS 009 A
Meter #:97604 RTU: - - County:SAN JUAN

	NAME RESERVOIR OR POOL	TYPE PROD	METHOD PROD	MEDIUM PROD
UPR COMP	HEATON COM LS 009A FT 97761	GAS	FLOW	TBG
LWR COMP	HEATON COM LS 009A MV 97604	GAS	FLOW	TBG

PRE-FLOW SHUT-IN PRESSURE DATA

	Hour/Date Shut-In	Length of Time Shut-In	SI Press. PSIG	Stabilized
UPR COMP	03/27/95 4:21 PM	7 DAYS	Ø PSIG	—
LWR COMP	03/27/95 4:21 PM	" "	300 PSIG	yes

FLOW TEST DATE NO.1

Commenced at (hour,date)* 4:21 PM 3-27-95			Zone Producing (Upr/Lwr)	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE Upper Lower	Prod Temp.	REMARKS
03/27/95	Day 1	Ø 440		Both Zones SI
03/28/95	Day 2	Ø 450		Both Zones SI
03/29/95	Day 3	Ø 460		Both Zones SI
03/30/95	Day 4	Ø 300		flowed lower zone
03/31/95	Day 5	Ø 307		"
04/01/95	Day 6	Ø 315		"

Production rate during test

Oil: _____ BOPD based on _____ BBLs in _____ Hrs _____ Grav _____ GOR _____

Gas: _____ MFCPD: Tested theu (Orifice or Meter) :METER

MID-TEST SHUT-IN PRESSURE DATA

	Hour, Date SI	Length of Time SI	SI Press. PSIG	Stabilized (yes/no)
UPR COMP				DRILLED APR - 5 1995
LWR COMP				APR - 5 1995

(Continue on reverse side)

OIL CON
BDR. 3

NORTHWEST NEW MEXICO PACKER BREAKFAST TEST

FP 810 2

FLOW TEST NO. 2

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours. _____ Gals. _____ CCFTR

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	By	my signature	19
New Mexico Oil Conservation Division			
		06 1995	
By		INSPECTOR	
Title			

Operator _____
By D. M. Linn
Title Facet Testimonials
Date _____

NORTHWEST NEW MEXICO PACKER LEAKAGE TEST INSTRUCTIONS