

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. #117

Location
of Well: Unit D Sec. 33 Twp. 32N 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	GALLUP	GAS	FLOWING	TUBING
Lower Completion	DAKOTA	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 706 CSG	Stabilized? (Yes or No) YES
Lower Completion	Hour, date shut-in 4-04-97	Length of time shut-in 7 DAYS	SI press. psig 1176 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		
4-10-97	24 HOUR	CSG	TBG		Q = 60
		715	368		
4-11-97	48 HOUR	719	357		Q = 24

Remarks: _____

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

Approved JUN 11 1997¹⁹
New Mexico Oil Conservation Division

Operator WILLIAMS PRODUCTION COMPANY

By _____
Title _____

By SUSAN GRIGUHN
Title CLERK
Date April 30, 1997

Deputy Oil & Gas Inspector

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OIL CONSERVATION
DIVISION