

NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
Revised 9-1-65

OIL CON. CO.
DIST. 3

☐ Partial ☐ Annual ☐ Special Date: _____									
Well Name: _____ Location: _____ Township: _____ Unit: _____									
Depth: _____		Total Depth: _____		Elevation: _____		Term or Lease Name: _____			
Well No.: _____		Well No.: _____		Well No.: _____		Well No.: _____			
Unit: _____		Sec: _____		Twp: _____		Range: _____			
County: _____									
State: _____									
Meter Run: _____									
Prover: _____									

FLOW DATA					TEMPERATURE DATA			CASING DATA		Duration of Flow
No.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Dis. bbl.	Temp. °F	Press. p.s.i.g.	Temp. °F		
1.	2		3/4				392		3 min	
2.										
3.										
4.										
5.										

RATE OF FLOW CALCULATIONS						
Co-efficient	$\sqrt{h_p/p_p}$	Flow Temp	Quantity Factor	Super Compress. Factor, Fpv	Rate of Flow	Unit

Name of Operator: _____
 Name of Engineer: _____
 Name of Surveyor: _____
 Name of Geologist: _____
 Name of Chemist: _____
 Name of Electrician: _____
 Name of Mechanic: _____
 Name of Welder: _____
 Name of Painter: _____
 Name of Carpenter: _____
 Name of Millwright: _____
 Name of Blacksmith: _____
 Name of Tinsmith: _____
 Name of Plumber: _____
 Name of Electrician: _____
 Name of Mechanic: _____
 Name of Welder: _____
 Name of Painter: _____
 Name of Carpenter: _____
 Name of Millwright: _____
 Name of Blacksmith: _____
 Name of Tinsmith: _____
 Name of Plumber: _____

Approved By Commission: _____
 Conducted By: _____
 Calculated By: _____
 Checked By: _____

Slope, r: _____