

NEW MEXICO OIL CONSERVATION COMMISSION

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Gulf Oil Corporation			Lease Lea State "CL" A			Well No. 1	
Location of Well	Unit G	Sec 2	Twp 16	Rge 32	County Lea		
Name of Reservoir or Pool		Type of Prod (Oil or Gas)	Method of Prod Flow, Art Lift	Prod. Medium (Tbg or Csg)	Choke Size		
Upper Compl	Anderson Ranch Wolfcamp		Oil	Pump	Tbg.	2" We	
Lower Compl	Anderson Ranch Devonian		Oil	Pump	Tbg.	2" We	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:00 A.M. 5-9-60

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>10:00 A.M. 5-10-60</u>		
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	70	20
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	90	110
Minimum pressure during test.....	70	10
Pressure at conclusion of test.....	90	40
Pressure change during test (Maximum minus Minimum).....	+20	-100
Was pressure change an increase or a decrease?.....	Increase	Decrease
Well closed at (hour, date): <u>10:00 A.M. 5-11-60</u>	Total Time On Production 24 hrs.	
Oil Production During Test: 212 bbls; Grav. 50.5 @60° ;	Gas Production During Test 243 MCF; GOR 1146	
Remarks _____		

FLOW TEST NO. 2

Well opened at (hour, date): <u>10:00 A.M. 5-12-60</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	110	120
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	110	125
Minimum pressure during test.....	15	120
Pressure at conclusion of test.....	15	120
Pressure change during test (Maximum minus Minimum).....	-95	+5
Was pressure change an increase or a decrease?.....	Decrease	Increase
Well closed at (hour, date): <u>10:00 A.M. 5-13-60</u>	Total time on Production 24 Hrs.	
Oil Production During Test: 29 bbls; Grav. 40.0 @60° ;	Gas Production During Test 60 MCF; GOR 2069	
Remarks _____		

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

Approved _____ 19
New Mexico Oil Conservation Commission

By _____
Title _____

Operator **GULF OIL CORPORATION**

By **RAYMOND WATSON**

Title **Gas Well Tester**

Date **5-18-60**

