

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

NEW MEXICO OIL CONSERVATION COMMISSION

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>TEXACO INC.</u>			Lease <u>Alu Maria R/NO. 4</u>			Well No. <u>1</u>	
Location of Well	Unit <u>C</u>	Sec <u>7</u>	Twp <u>16</u>	Rge <u>35</u>	County <u>LEA</u>		
	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	<u>Vacuom San Andew</u>		<u>Oil</u>	<u>Red Pump</u>	<u>CSG.</u>	<u>—</u>	
Lower Compl	<u>Vacuom ABC Reef</u>		<u>Oil</u>	<u>Red Pump</u>	<u>CSG.</u>	<u>—</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, te): 7:30 A.M. 9/28/76

Well opened at (hour, date): 7:30 A.M. 9/29/76 Upper Completion Lower Completion

Indicate by (X) the zone producing..... X

Pressure at beginning of test..... 380 260

Stabilized? (Yes or No)..... Yes Yes

Maximum pressure during test 380 260

Minimum pressure during test..... 20 220

Pressure at conclusion of test..... 20 220

Pressure change during test (Maximum minus Minimum)..... 360 40

Was pressure change an increase or a decrease?..... decrease decrease

Well closed at (hour, date): 3:30 P.M. 9/29/76 Total Time On Production 8 hours

Oil Production 5 bbls; Grav. 37.4 ; Gas Production 4.25 MCF; GOR 850

During Test: 5 bbls; Grav. 37.4 ; During Test 4.25 MCF; GOR 850

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): 7:15 A.M. 9/30/76 Upper Completion Lower Completion

Indicate by (X) the zone producing..... X

Pressure at beginning of test..... 620 200

Stabilized? (Yes or No)..... Yes Yes

Maximum pressure during test..... 600 200

Minimum pressure during test..... 580 40

Pressure at conclusion of test..... 580 40

Pressure change during test (Maximum minus Minimum)..... 20 160

Was pressure change an increase or a decrease?..... decrease decrease

Well closed at (hour, date) 12:45 pm 9/30/76 Total time on Production 5 hours 30 min

Oil Production 2 bbls; Grav. 40.0 ; Gas Production 1.7 MCF; GOR 850

During Test: 2 bbls; Grav. 40.0 ; During Test 1.7 MCF; GOR 850

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

Operator TEXAGO, INC.

By _____

By _____
Title _____

Title Asst. Dist. Supt.

Date 10-15-76