

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

INSTRUCTIONS ON REVERSE  
SIDE

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>TEXACO PRODUCING INC.</u>				Lease <u>NEW MEXICO "L" STATE</u>		Well No. <u>6</u>	
Location of Well	Unit <u>B</u>	Sec. <u>1</u>	Twp <u>18</u>	Rge <u>34</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>VACUUM GLORIETTA</u>		<u>OIL</u>	<u>ROD PUMP</u>		<u>0</u>	
Lower Compl	<u>VACUUM WOLFCAMP</u>		<u>OIL</u>			<u>0</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:00 AM 10-29-92

Well opened at (hour, date): 8:30 AM 10-30-92

	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>40</u>	<u>0</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>40</u>	<u>0</u>
Minimum pressure during test.....	<u>0</u>	<u>0</u>
Pressure at conclusion of test.....	<u>0</u>	<u>0</u>
Pressure change during test (Maximum minus Minimum).....	<u>40</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>NONE</u>

Well closed at (hour, date): 1:30 PM 10-30-92 Total Time On Production 5 HOURS

Oil Production During Test: 0 bbls; Grav. 0 Gas Production During Test: 0 MCF; GOR 0

Remarks \_\_\_\_\_

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): _____		
Indicate by ( X ) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		
Maximum pressure during test.....		
Minimum pressure during test.....		
Pressure at conclusion of test.....		
Pressure change during test (Maximum minus Minimum).....		
Was pressure change an increase or a decrease?.....		

Well closed at (hour, date) \_\_\_\_\_ Total time on Production \_\_\_\_\_

Oil production During Test: \_\_\_\_\_ bbls; Grav. \_\_\_\_\_ ; Gas Production During Test: \_\_\_\_\_ MCF; GOR \_\_\_\_\_

Remarks \_\_\_\_\_

OPERATOR CERTIFICATE OF COMPLIANCE

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

Operator William D. Short  
Signature  
William D. Short Well Technician  
Printed Name Title  
11-11-92 505-396-4414

OIL CONSERVATION DIVISION

NOV 16 '92

Date Approved \_\_\_\_\_

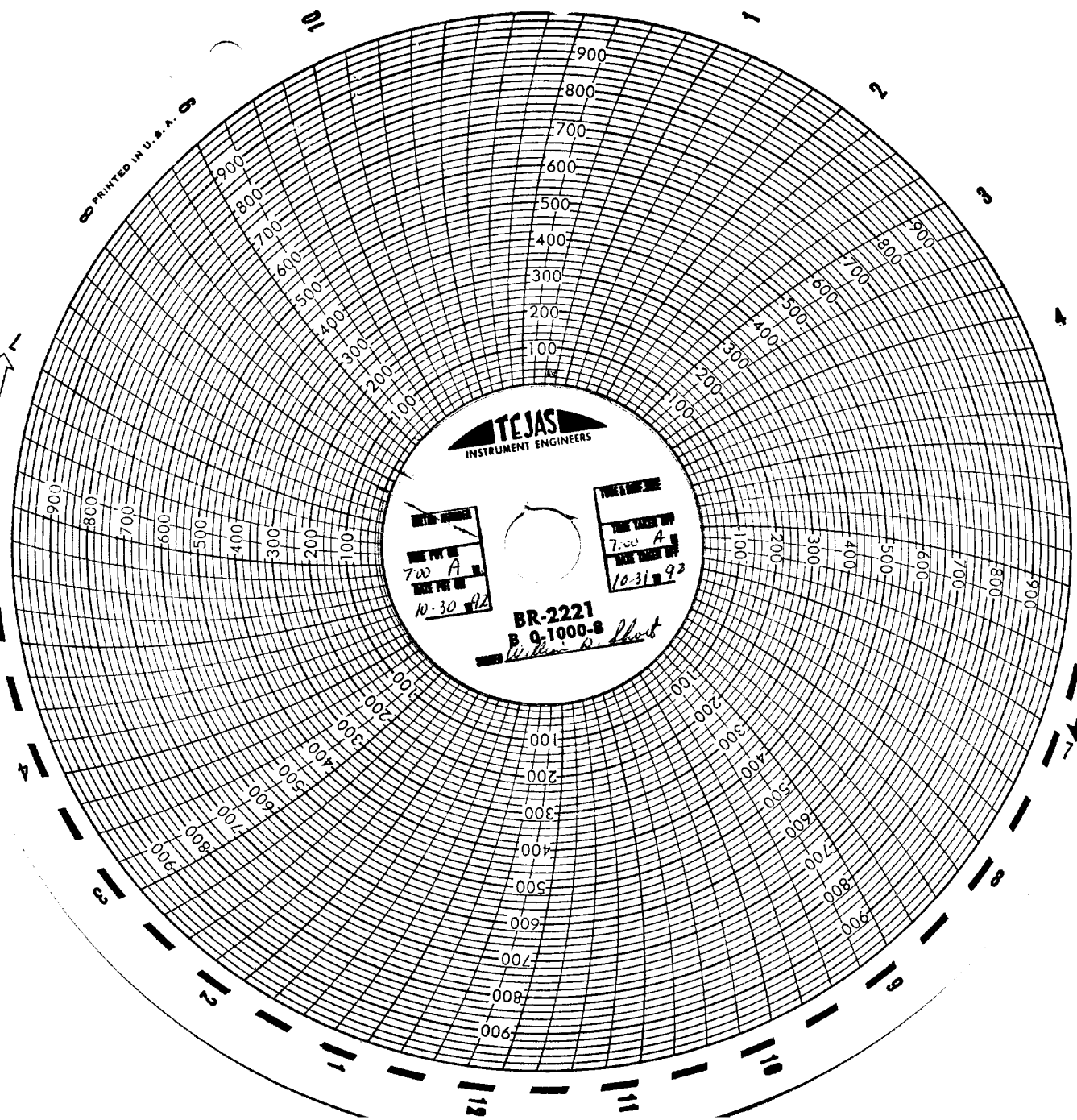
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title \_\_\_\_\_

PRINTED IN U.S.A.

DAY

NIGHT



TEJAS  
INSTRUMENT ENGINEERS

DATE TAKEN  
7.00 A  
DATE TAKEN  
10-30-92

TIME TAKEN  
7.00 A  
DATE TAKEN  
10-31-92

BR-2221  
B Q-1000-S  
*William R. Hunt*

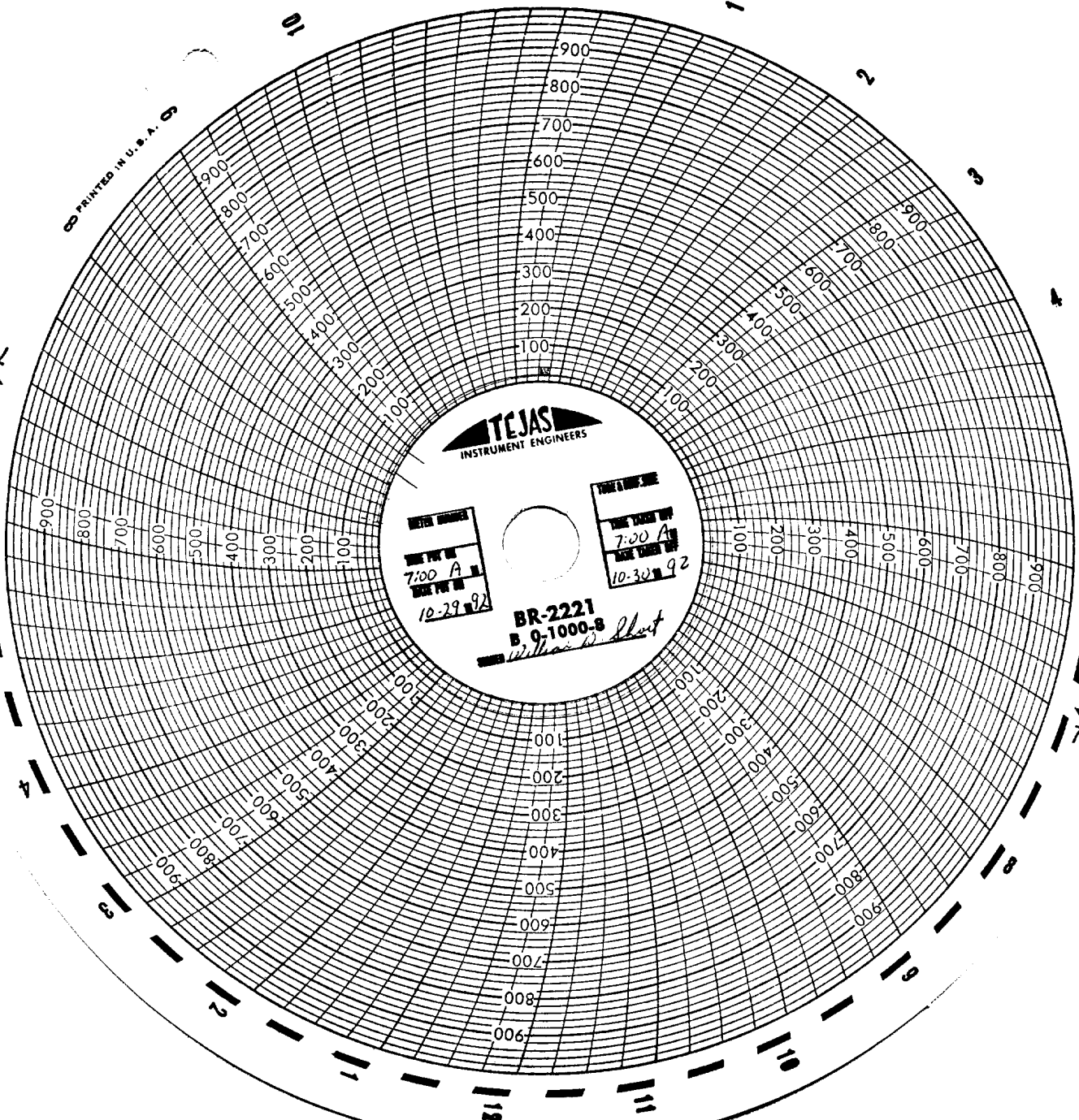
RECEIVED  
NOV 19 1992  
FBI OFFICE

PRINTED IN U.S.A.

DAY

5

NIGHT



**TEJAS**  
INSTRUMENT ENGINEERS

DATE TAKEN OFF  
7:00 A  
DATE TAKEN ON  
10-29-92

DATE TAKEN OFF  
7:00 A  
DATE TAKEN ON  
10-30-92

BR-2221  
B, Q-1000-S

*William D. Short*

RECEIVED  
JUN 18 1992  
JUN 18 1992