

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

OIL CONSERVATION DIVISION

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

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 Exploration & Production, Inc.</u>			Lease <u>Texaco Cities Service STATE</u>			Well No. <u>1</u>	
Location of Well	Unit <u>G</u>	Sec. <u>32</u>	Twp <u>19 S</u>	Rge <u>32 E</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>LUCK STRAWN</u>		<u>GAS</u>	<u>Flow</u>	<u>Tbg.</u>	<u>open</u>	
Lower Compl	<u>LUCK MORROW</u>		<u>GAS</u>	<u>SI</u>	<u>Tbg</u>	<u>-</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11:20 A.M. 11-23-93

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>1:30 P.M. 11-23-93</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>400</u>	<u>1050</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>400</u>	<u>1050</u>
Minimum pressure during test.....	<u>0</u>	<u>1035</u>
Pressure at conclusion of test.....	<u>0</u>	<u>1035</u>
Pressure change during test (Maximum minus Minimum).....	<u>400</u>	<u>15</u>
Was pressure change an increase or a decrease?.....	<u>Decrease</u>	<u>Decrease</u>
Well closed at (hour, date): <u>8:30 A.M. 11-24-93</u>	Total Time On Production <u>19 HRS</u>	
Oil Production During Test: <u>0</u> bbls; Grav. <u>-</u>	Gas Production During Test <u>8</u> MCF; GOR <u>-</u>	
Remarks <u>MORROW SHUT IN STRAWN SHUT IN, OPENED ONCE A MONTH</u>		

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

Texaco E. & P. Inc.

Operator

Juan G. Cano

Signature

Juan G. Cano Field Tech. Relief

Printed Name

Title

11/24/93

Date

505 397-3571

Telephone No.

OIL CONSERVATION DIVISION

NOV 29 1993

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

Title