

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

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

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator AMERADA HESS CORPORATION				Lease STATE A		Well No. 5
Location of Well	Unit A	Sec. 32	Twp 18	Rge 38	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	HOBBS LOWER BLINEBRY		OIL	FLOW	TBG.	24/64
Lower Compl	HOBBS DRINKARD		OIL	FLOW	TBG.	20/64

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 a.m. 7-12-95

Well opened at (hour, date): 9:00 a.m. 7-13-95

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	580	590
Stabilized? (Yes or No).....	NO	NO
Maximum pressure during test.....	590	590
Minimum pressure during test.....	580	50
Pressure at conclusion of test.....	580	50
Pressure change during test (Maximum minus Minimum).....	10	540
Was pressure change an increase or a decrease?.....	DECREASE	DECREASE

Well closed at (hour, date): 9:00 a.m. 7-14-95

Oil Production _____ Gas Production _____

During Test: 1 bbls; Grav. - ; During Test 233 MCF; GOR 233,000

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): 9:00 a.m. 7-15-95

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	600	600
Stabilized? (Yes or No).....	YES	NO
Maximum pressure during test.....	600	680
Minimum pressure during test.....	30	600
Pressure at conclusion of test.....	30	680
Pressure change during test (Maximum minus Minimum).....	570	80
Was pressure change an increase or a decrease?.....	DECREASE	INCREASE

Well closed at (hour, date): 7-16-95

Oil production _____ Gas Production _____

During Test: 6 bbls; Grav. - ; During Test 88 MCF; GOR 14,667

Remarks _____

OPERATOR CERTIFICATE OF COMPLIANCE

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

AMERADA HESS CORPORATION

Operator
Bill Petree

Signature

BILL PETREE

OPERATIONS TECHNICIAN

Printed Name

Title

08-04-95

(505) 393-2144

Date

Telephone No.

OIL CONSERVATION DIVISION

SEP 15 1995

Date Approved

ORIGINAL SIGNED BY MERRY SEXTON
DISTRICT I SUPERVISOR

By

Title

200 2.1 932

RECEIVED

AUG 27 1956
U.S. AIR FORCE
OFFICE