

NEW MEXICO OIL CONSERVATION COMMISSION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

PAGE 1 OF 2

Operator Socony Mobil Oil Company, Inc.				Lease State Bridges		Well No. 96	
Location of Well	Unit 14	Sec 26	Twp 17	Rge 34	County		
	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	Vacuum Abo		Oil	Flow	Tbg.	24/64	
Lower Compl	Vacuum Penn		Oil	Flow	Tbg.	10/64	
Mid. Compl.	Vacuum Wolfcamp		Oil	Flow	Tbg.	24/64	

FLOW TEST NO. 1

All ~~DATA~~ zones shut-in at (hour, date): 11:00 a. m. 4/8/63

Well opened at (hour, date): 11:00 a. m. 4/9/63	Middle Completion	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X	
Pressure at beginning of test.....	739	239	4056
Stabilized? (Yes or No).....	No	Yes	Yes
Maximum pressure during test.....	815	239	4057
Minimum pressure during test.....	739	29	4056
Pressure at conclusion of test.....	815	29	4057
Pressure change during test (Maximum minus Minimum).....	76	210	1
Was pressure change an increase or a decrease?.....	increase	decrease	increase
Well closed at (hour, date): 11:00 a. m. 4/10/63	Total Time On Production	24 Hrs.	
Oil Production	Gas Production		
During Test: 0 bbls; Grav. 0	During Test TSTM	MCF; GOR	TSTM
Remarks No Leak indicated			

FLOW TEST NO. 2

Well opened at (hour, date): 11:00 a. m. 4/11/63	Middle Completion	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X		
Pressure at beginning of test.....	878	30	4058
Stabilized? (Yes or No).....	No	Yes	Yes
Maximum pressure during test.....	878	102	4058
Minimum pressure during test.....	173	30	4058
Pressure at conclusion of test.....	173	102	4058
Pressure change during test (Maximum minus Minimum).....	705	72	0
Was pressure change an increase or a decrease?.....	decrease	increase	None
Well closed at (hour, date) 11:00 a. m. 4/12/63	Total time on Production	24 Hrs.	
Oil Production	Gas Production		
During Test: 346 bbls; Grav. 40	During Test 254.6	MCF; GOR	736
Remarks No Leak indicated.			

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 Socony Mobil Oil Company, Inc.

By A. H. Joiner
A. H. Joiner

By _____
Title _____

Title Production Assistant

Date April 18, 1963

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Socony Mobil Oil Company, Inc.				Lease State Bridges		Well No. 96	
Location of Well	Unit H	Sec 26	Twp 17	Rge 24	County		
	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.	Vacuum Abo		Oil	Flow	Tbg.	24/64	
Lower Compl.	Vacuum Penn		Oil	Flow	Tbg.	10/64	
Mid. Compl.	Vacuum Wolfcamp		Oil	Flow	Tbg.	24/64	
FLOW TEST NO. X 3							

All ~~EXH~~ zones shut-in at (hour, date): **11:00 a. m. 4/12/63**

	Middle Completion	Upper Completion	Lower Completion
Well opened at (hour, date): 11:00 a. m. 4/13/63			
Indicate by (X) the zone producing.....			X
Pressure at beginning of test.....	612	125	4057
Stabilized? (Yes or No).....	No	Yes	Yes
Maximum pressure during test.....	663	164	4057
Minimum pressure during test.....	612	125	2500
Pressure at conclusion of test.....	663	164	3156
Pressure change during test (Maximum minus Minimum).....	51	39	1557
Was pressure change an increase or a decrease?.....	increase	increase	decrease
Well closed at (hour, date): 11:00 a. m. 4/14/63	Total Time On Production	24 Hrs.	
Oil Production	Gas Production		
During Test: 271 bbls; Grav. 46.1 ;	During Test 1050 MCF; GOR 3876		

Remarks **No Leak indicated.**

FLOW TEST NO. 2

	Middle Completion	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	Gas Production		
During Test: bbls; Grav. ;	During Test MCF; GOR		
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 **Socony Mobil Oil Company, Inc.**

By **A. H. Joiner**
Production Assistant

Date **April 18, 1963**