

NEW MEXICO OIL CONSERVATION COMMISSION

SEE LATEST NEW MEXICO PACKER LEAKAGE TEST

Operator MOBILE OIL CORP			Lease BAIDGES SANTA FE STATE CORP			Well No. 1	
Location of Well	Unit D	Sec 24	Twp 17	Rge 34	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	VAC ABO-M		OIL	PUMP	TAG	2"	
Lower Compl	VAC U-Penn		OIL	PUMP	TAG	2"	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:00 A.M. 9-29-69

Well opened at (hour, date): 8:00 A.M. 9-30-69	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	75	250
Stabilized? (Yes or No).....	YES	YES
Maximum pressure during test.....	75	250
Minimum pressure during test.....	75	85
Pressure at conclusion of test.....	75	85
Pressure change during test (Maximum minus Minimum).....	NONE	165
Was pressure change an increase or a decrease?.....	SAME	DECREASE
Well closed at (hour, date): 8:00 A.M. 10-1-69	Total Time On Production 24	
Oil Production	Gas Production	
During Test: 32 bbls; Grav. 41.2 @ 60; During Test 20.4 MCF; GOR 638/1		
Remarks		

FLOW TEST NO. 2

Well opened at (hour, date): 8:00 A.M. 10-2-69	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	65	75
Stabilized? (Yes or No).....	YES	YES
Maximum pressure during test.....	65	75
Minimum pressure during test.....	65	75
Pressure at conclusion of test.....	65	75
Pressure change during test (Maximum minus Minimum).....	NONE	NONE
Was pressure change an increase or a decrease?.....	SAME	SAME
Well closed at (hour, date): 8:00 A.M. 10-3-69	Total time on Production 24 hr.	
Oil Production	Gas Production	
During Test: 98 bbls; Grav. 39.2 @ 60; During Test 30.6 MCF; GOR 312/1		
Remarks		

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

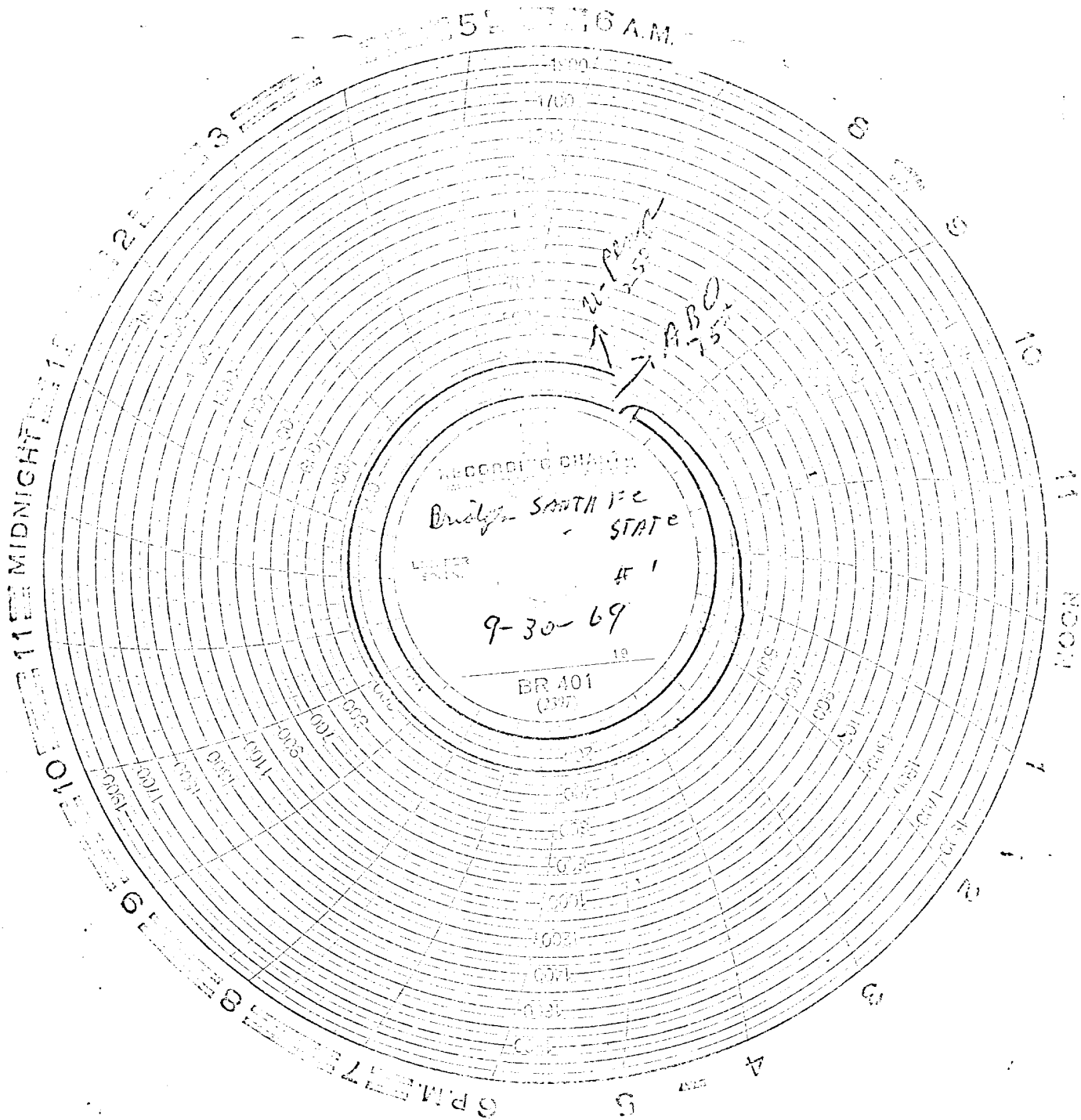
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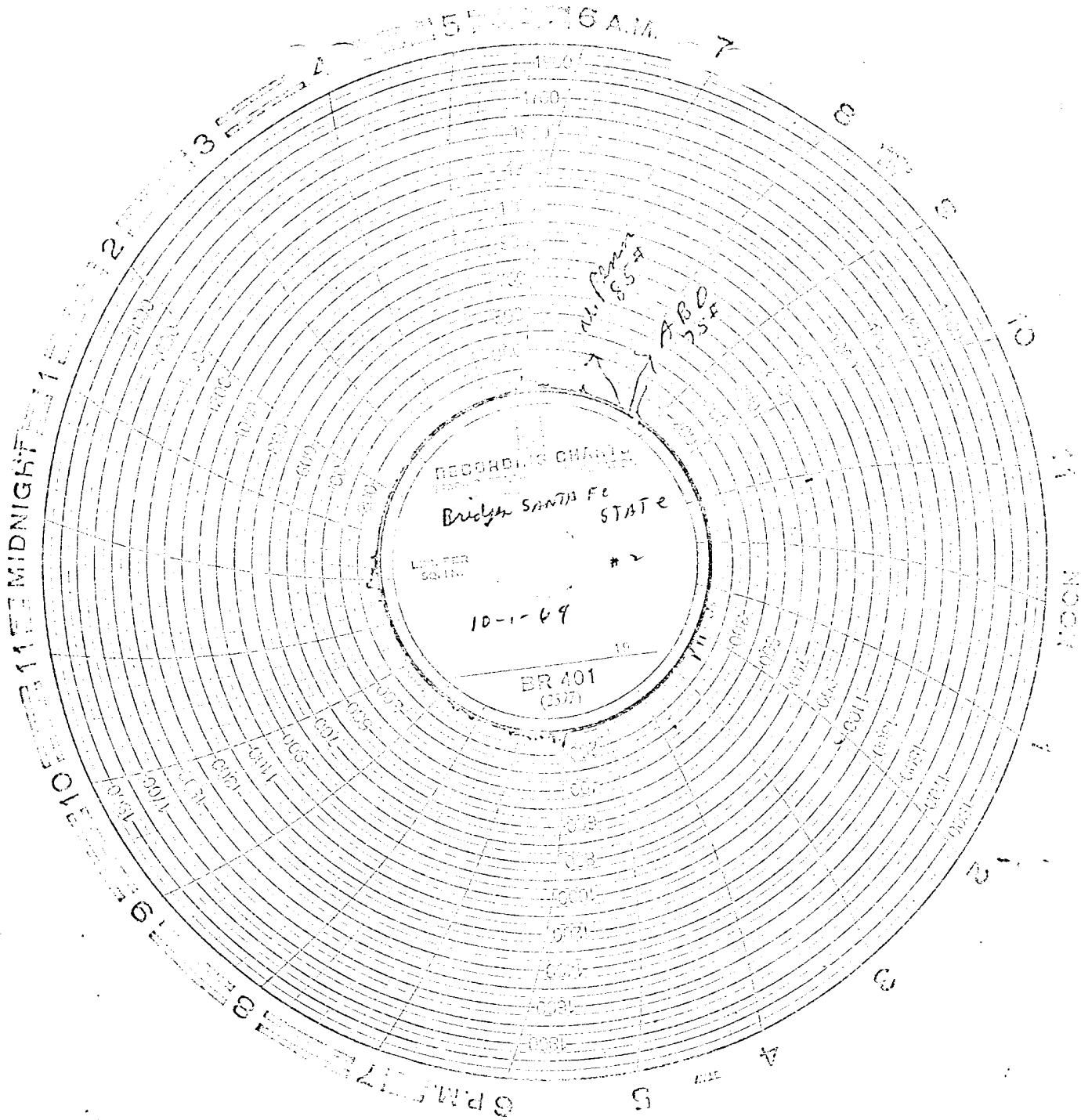
Approved _____
New Mexico Oil Conservation Commission

By _____
Title SUPERVISOR

Operator _____
By _____

Title Authorized Agent





RECORDING CHART

BRIDGES SANTA FE STATE

COMM.

10-2-69

ER 401 (217)

a. power 1.5w

APD 6w

11 PM MIDNIGHT

10 PM

9 PM

8 PM

7 PM

6 PM

5 PM

4 PM

3 PM

2 PM

1 PM

12 PM

11 AM

10 AM

9 AM

8 AM

7 AM

6 AM

5 AM

4 AM

3 AM

2 AM

1 AM

12 AM

