

NEW MEXICO OIL CONSERVATION COMMISSION

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator		Tidewater Oil Company			Lease		State "J"		Well No. 3	
Location of Well		Unit F	Sec 17	Twp 19S	Rge 37E	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	Eumont			Gas	Flow		Casing		-	
Lower Compl	Monument			Oil	Gas Lift		Tubing		-	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:00 A.M., 8-9-62

Well opened at (hour, date): 10:00 A.M., 8-10-62	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	650	250
Stabilized? (Yes or No).....	No	Yes
Maximum pressure during test.....	690	250
Minimum pressure during test.....	650	0
Pressure at conclusion of test.....	690	20
Pressure change during test (Maximum minus Minimum).....	40	250
Was pressure change an increase or a decrease?.....	Increase	Decrease
Well closed at (hour, date): 10:00 A.M., 8-11-62	Total Time On Production 24 hrs.	
Oil Production	Gas Production	
During Test: 0 bbls; Grav. -	During Test 5.3 MCF; GOR -	
Remarks		

FLOW TEST NO. 2

Well opened at (hour, date): 10:45 A.M., 8-12-62	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	710	50
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	710	50
Minimum pressure during test.....	560	50
Pressure at conclusion of test.....	560	50
Pressure change during test (Maximum minus Minimum).....	150	0
Was pressure change an increase or a decrease?.....	Decrease	No change
Well closed at (hour, date): 10:45 A.M., 8-13-62	Total time on Production 24 hrs.	
Oil Production	Gas Production	
During Test: 0 bbls; Grav. -	During Test 187.8 MCF; GOR -	
Remarks		

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

Approved _____ 19	Operator Tidewater Oil Company
New Mexico Oil Conservation Commission	Original Signed By _____
By _____	G. L. WADA
Title _____	Area Supt.
Title _____	Date 8-17-62