

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator		Gulf Oil Corporation		Lease		Theo. Anderson		Well		No. 4	
Location of Well		Unit B		Sec 17		Twp 20S		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		Ement		Gas		Flow		Casing			
Lower Compl		Mament		Oil		Flow		Tubing			

FLOW TEST NO. 1

Both zones shut-in at (hour, date): <u>9:45 a.m., 7-27-59</u>		Upper Completion	Lower Completion
Well opened at (hour, date): <u>9:45 a.m., 7-28-59</u>			
Indicate by (X) the zone producing.....		<u>X</u>	
Pressure at beginning of test.....		<u>960</u>	<u>200</u>
Stabilized? (Yes or No).....		<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....		<u>960</u>	<u>200</u>
Minimum pressure during test.....		<u>665</u>	<u>200</u>
Pressure at conclusion of test.....		<u>665</u>	<u>200</u>
Pressure change during test (Maximum minus Minimum).....		<u>=295</u>	<u>-</u>
Was pressure change an increase or a decrease?.....		<u>Decr.</u>	<u>-</u>
Well closed at (hour, date): <u>9:45 a.m., 7-29-59</u>		Total Time On Production	<u>24 hrs</u>
Oil Production	Gas Production		
During Test: _____ bbls; Grav. _____	During Test <u>2654.0</u>	MCF; GOR	_____
Remarks _____			

FLOW TEST NO. 2

Well opened at (hour, date):	Upper Completion	Lower Completion
9:45 a.m., 7-30-59		
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	950	200
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	960	200
Minimum pressure during test.....	950	0
Pressure at conclusion of test.....	960	150
Pressure change during test (Maximum minus Minimum).....	+10	-200
Was pressure change an increase or a decrease?.....	Incr.	Decr.
Well closed at (hour, date) 9:45 a.m., 7-31-59	Total time on Production	24 hrs
Oil Production	Gas Production	
During Test: 51 bbls; Grav. 32.4	During Test 23.0	MCF; GOR 457
Remarks Photostatic copies of pressure recording charts are attached.		

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 **GULF OIL CORPORATION**

By C. M. RUPPES

Title **Area Petroleum Engineer**

Date **8-3-59**

By [Signature]
Title _____