Submit 3 Copies to Appropriate Dist. Office

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Revised 1-1-89

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

JR Cone B #1

Operator			Lease		Well No.
JOHN H. HENDRIX CORP.			J.R. CONE GAS COM		1
Location of Well	Unit N	Sec. 26	Twp 21	Rge 37	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	Blinebry	Gas	Csg. Flow	Csg	12/64
Lower Compl	Tubb	Gas	Pump	Tbg	12/64

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 6:00 AM 7/20/96

Well opened at (hour, date): 12:00 PM 7/20/96

	Upper Completion	Lower Completion
Indicate by (X) the zone producing	X	
Pressure at beginning of test	195	60
Stabilized? (Yes or No)	yes	yes
Maximum pressure during test	195	65
Minimum pressure during test	60	60
Pressure at conclusion of test	60	65
Pressure change during test (Maximum minus Minimum)	135	5
Was pressure change an increase or a decrease?	Decrease	Increase

Well closed at (hour, date): 6:00 PM 7/20/96 Total Time On Production 6 hours

Oil Production During Test: ¼ bbls; Grav. 40 Gas Production During Test 100 MCF; GOR 400,000

Remarks No evidence of communication

FLOW TEST NO. 2

Well opened at (hour, date): 6:00 AM 7/21/96

	Upper Completion	Lower Completion
Indicate by (X) the zone producing		x
Pressure at beginning of test	300	70
Stabilized? (Yes or No)	yes	yes
Maximum pressure during test	330	70
Minimum pressure during test	300	30
Pressure at conclusion of test	330	30
Pressure change during test (Maximum minus Minimum)	30	40
Was pressure change an increase or a decrease?	Increase	Decrease

Well closed at (hour, date) 12:00 AM 7/21/96 Total time on Production 6 hours

Oil production During Test: ½ bbls; Grav. 42 ; Gas Production During Test 1 MCF; GOR 500

Remarks No evidence of communication

OPERATOR CERTIFICATE OF COMPLIANCE

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

JOHN H. HENDRIX CORP.
Operator

Marvin Burrows
Signature

MARVIN BURROWS-PRODUCTION SUPT.
Printed Name Title

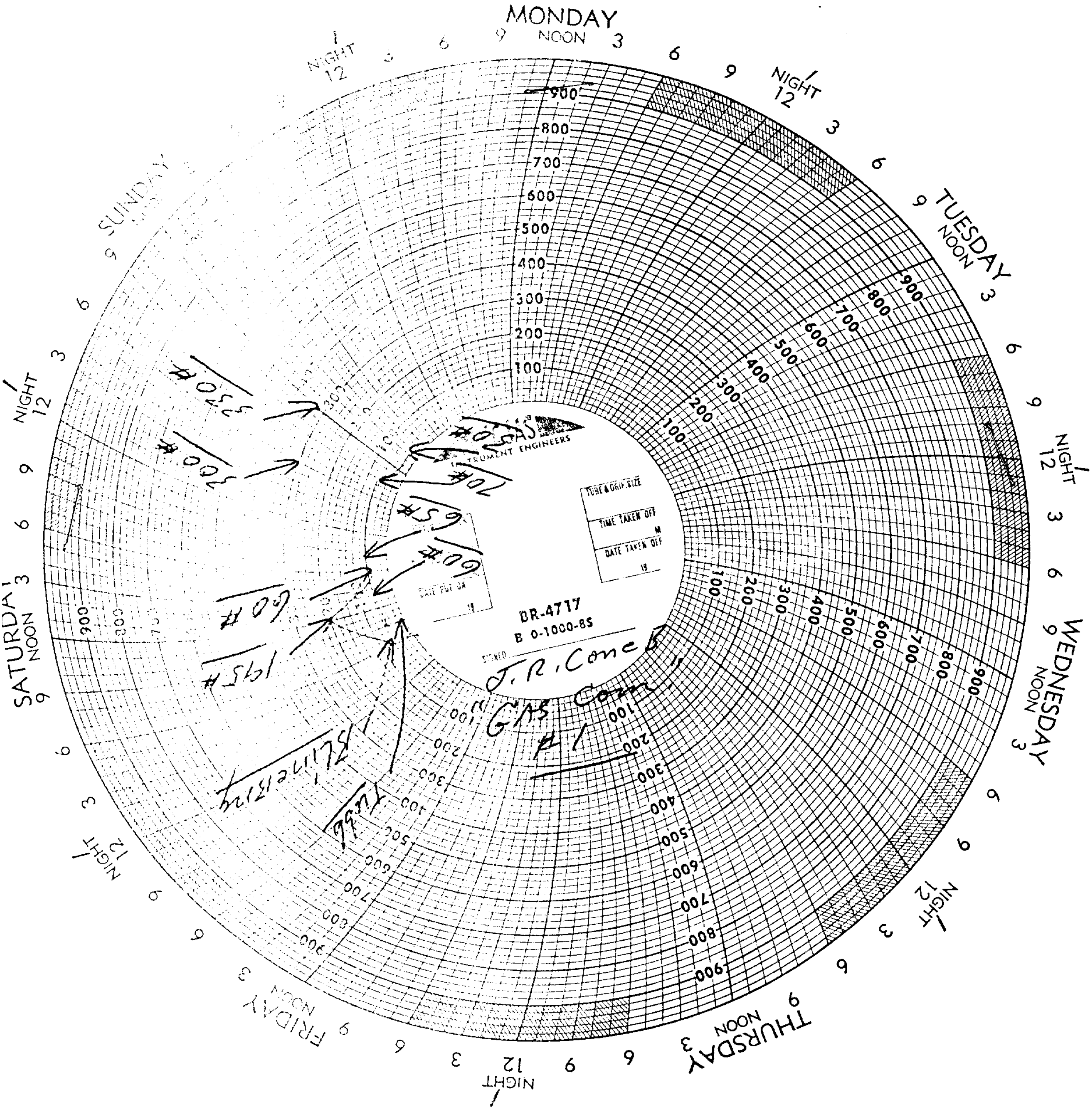
8-7-96 394-2649
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 14 1996

By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

Title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NOON
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J. R. Cone B
GAS Com
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