

DISTRICT I
Box 1980, Hobbs, NM 88240

DISTRICT II
Drawer DD, Artesia, NM 88210

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

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

Operator John H. Hendrix Corp. Lease J.R. Cone Gas Com Well No. #1

Location 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
Blinebry			Gas	Csg. Flow	Csg	12/64
Tubb			Gas	Pump	Tbg	12/64

FLOW TEST NO. 1

Well closed at (hour, date): 6:00 AM 8/12/95

Well opened at (hour, date): 12:00 PM 8/12/95

Indicate by (X) the zone producing.....	Upper Completion	Lower Completion
Pressure at beginning of test.....	280	150
Stabilized? (Yes or No).....	yes	yes
Maximum pressure during test.....	280	150
Minimum pressure during test.....	70	150
Pressure at conclusion of test.....	70	150
Pressure change during test (Maximum minus Minimum).....	210	0
Was pressure change an increase or a decrease?.....	Decrease	None

Well closed at (hour, date): 6:00 PM 8/12/95 Total Time On Production 6 hours

Oil Production During Test: 1/4 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 8/13/95

Indicate by (X) the zone producing.....	Upper Completion	Lower Completion
Pressure at beginning of test.....	350	150
Stabilized? (Yes or No).....	no	yes
Maximum pressure during test.....	370	150
Minimum pressure during test.....	350	30
Pressure at conclusion of test.....	370	30
Pressure change during test (Maximum minus Minimum).....	20	120
Was pressure change an increase or a decrease?.....	Increase	Decrease

Well closed at (hour, date): 12:00 am 8/13/95 Total time on Production 6 hours

Oil production During Test: 1/2 bbls; Grav. 42 Gas Production During Test 100 MCF; GOR 200,000

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
9-28-95
Date
505-394-2649
Telephone No.

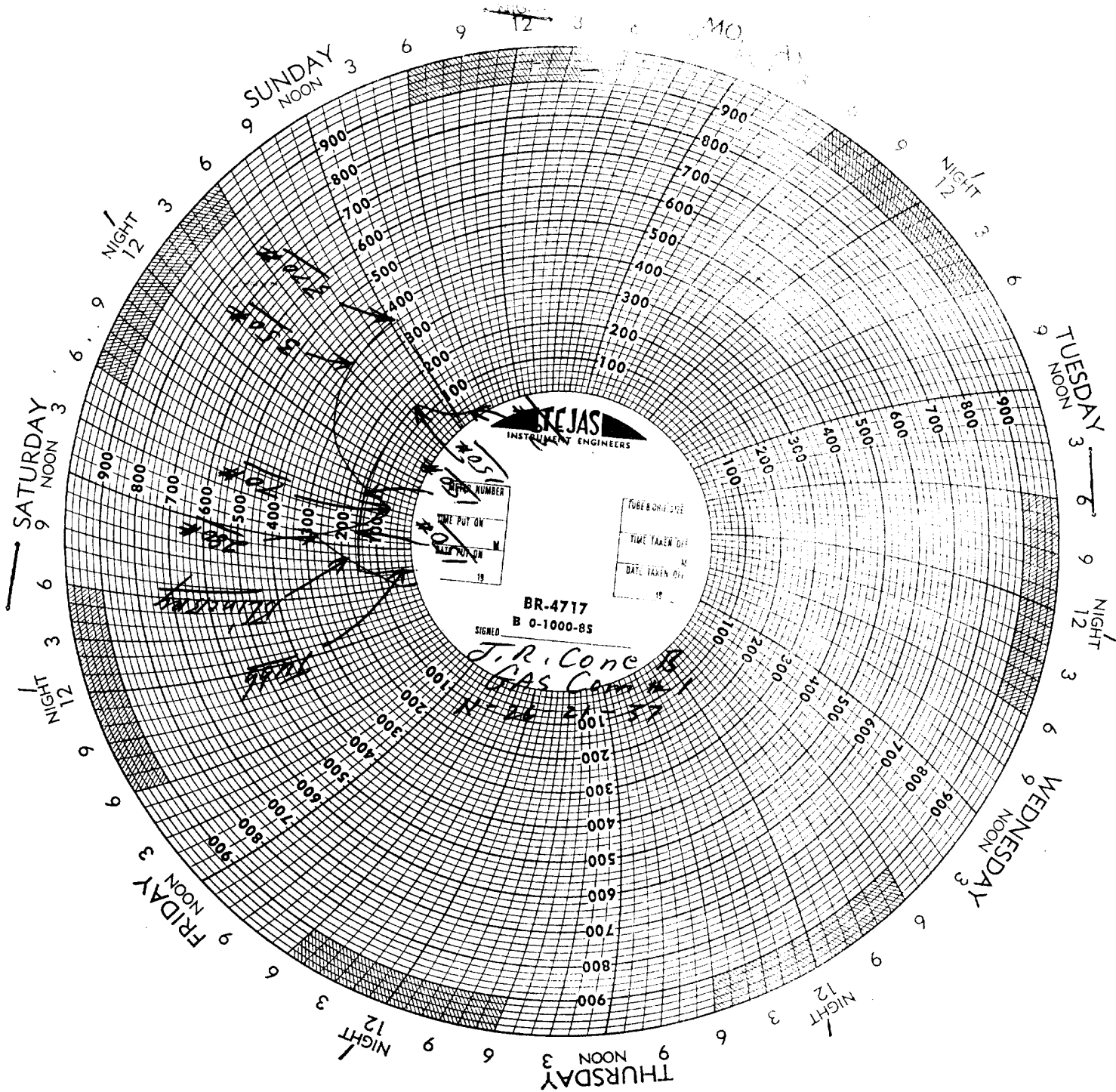
OIL CONSERVATION DIVISION

OCT 04 1995

Date Approved

By ORIGINAL SIGNATURE SEXTON
DISTRICT I SUPERVISOR

Title



2000 10 100

