

This form is not to be used for reporting packer leakage tests in Northwest New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator TEXACO Inc.			Lease V. M. Henderson			Well No. 2	
Location of Well	Unit A	Sec 30	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	Paddock		* Shut-in	-	Tbg.	-	
Lower Compl	Blinebry		Gas	Flow	Tbg.	1"	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11:00 AM 5-6-74

Well opened at (hour, date): 11:00 AM 5-7-74

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test..... psi.....	0	155
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test..... psi.....	0	155
Minimum pressure during test..... psi.....	0	155
Pressure at conclusion of test..... psi.....	0	155
Pressure change during test (Maximum minus Minimum).....	0	0
Was pressure change an increase or a decrease?.....	-	-
Well closed at (hour, date): 2:30 PM 5-7-74	Total Time On Production 3 hrs 30 min	
Oil Production	Gas Production	
During Test: 1 bbls; Grav. 40.0	During Test: 1 MCF; GOR 1000	
Remarks * Paddock is temporarily abandoned, Blinebry Gas flow pressure insufficient to produce in high pressure gas line.		

FLOW TEST NO. 2

Well opened at (hour, date):

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		
Maximum pressure during test.....		
Minimum pressure during test.....		
Pressure at conclusion of test.....		
Pressure change during test (Maximum minus Minimum).....		
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date):	Total time on Production	
Oil Production	Gas Production	
During Test: bbls; Grav. ;	During Test: MCF; GOR	
Remarks		

Annual Zone Segregation Test

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 TEXACO Inc.
By _____
Title ASST. DIST. SUPERINTENDENT
Date _____

By _____
Title _____
Orig. Signed by Joe F. [unclear]