

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>TEXACO, INC.</u>			Lease <u>V. M. HENDERSON</u>			Well No. <u>4</u>		
Location of Well		Unit <u>C</u>	Sec <u>30</u>	Twp <u>21</u>	Rge <u>37</u>	County <u>Lea</u>		
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 <u>EUMONT</u>			<u>GAS</u>	<u>Flow</u>	<u>Csg.</u>	<u>1"</u>		
Lower Compl <u>PENROSE SKELLY</u>			<u>OIL</u>	<u>Art. Lift</u>	<u>Tbg.</u>	<u>-</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:30 A.M. 9-12-66

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9:30 A.M. 9-13-66</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>10 psi</u>	<u>40 psi</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>10 psi</u>	<u>50 psi</u>
Minimum pressure during test.....	<u>10 psi</u>	<u>40 psi</u>
Pressure at conclusion of test.....	<u>10 psi</u>	<u>50 psi</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>10 psi</u>
Was pressure change an increase or a decrease?.....	<u>-</u>	<u>INCREASE</u>
Well closed at (hour, date): <u>10:45 A.M. 9-14-66</u>	Total Time On Production	<u>25 hrs. 15 min.</u>
Oil Production	Gas Production	
During Test: <u>0</u> bbls; Grav. <u>-</u> ; During Test <u>-</u>	MCF; GOR	<u>-</u>
Remarks <u>EUMONT GAS ZONE IS DEAD.</u>		

FLOW TEST NO. 2

Well opened at (hour, date): <u>10:45 A.M. 9-15-66</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>10 psi</u>	<u>60 psi</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>10 psi</u>	<u>60 psi</u>
Minimum pressure during test.....	<u>10 psi</u>	<u>20 psi</u>
Pressure at conclusion of test.....	<u>10 psi</u>	<u>20 psi</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>40 psi</u>
Was pressure change an increase or a decrease?.....	<u>-</u>	<u>decrease</u>
Well closed at (hour, date): <u>10:45 A.M. 9-16-66</u>	Total time on Production	<u>24 hrs.</u>
Oil Production	Gas Production	
During Test: <u>2</u> bbls; Grav. <u>35.0</u> ; During Test <u>1</u>	MCF; GOR	<u>500</u>
Remarks <u>ANNUAL PACKER LEAKAGE TEST.</u>		

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 Sam Hille

By _____
Title _____

Title Asst. Dist. Supt.
Date 9-27-66