بع عصصت خانستمینی Appropriate Dist. Office

DISTRICT

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 Depa.

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REVISED 1-1-59

INSTRUCTIONS ON REVERSE

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

ocation (Well	Unit 1 Sec. 34	Twp 21S	Rp 37E	County Le	a
	Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tog. or Cag)	Choks Size
Ompt	Blinebry (PRO GAS) (CONSMO.)	Gas	Flow	Csg	open
Lower Compt	Drinkard	Gas	Flow	Tbg	open
		FLOW TE	ST NO. 1		

ell opened at (hour, date): 3:00 PM, 3-20-92	Upper	Lower
opened at (notal, table).	Completion	Completion
ticate by (X) the zone producing	6.6	260
essure at beginning of test.	,	
ubilized? (Yes or No)	<u>yes</u>	<u>yes</u>
ximum pressure during test.		260
nimum pressure during test		260
ssure at conclusion of test	21	260
ssure change during test (Maximum minus Minimum)	-45	nc
s pressure change an increase or a decrease?	decrease	
Il closed at (hour, date): 3:00 PM, 3-21-92 Total Time On Production	24 hours	
Production Gas Production ing Test During Test 4	MCF; GOR	_
naris -		
l opened at (hour, date): 9:00 AM, 3-22 FLOW TEST NO. 2	Upper Completion	Lower Completion
cate by (X) the zone producing		X
sure at beginning of test.	85	260
ilized? (Yes or No)	yes	yes
imum pressure during test	90	260
		100
imum pressure during test	85	100
	<u>85</u> 90	100
sure at conclusion of test.	90	
sure at conclusion of testsure change during test (Maximum minus Minimum)	<u>90</u> +5	100
sure at conclusion of test. sure change during test (Maximum minus Minimum). pressure change an increase or a decrease?. closed at (hour, date) 9:30 AM, 3-23-92 Total time on Production	<u>90</u> +5	100 -160 decrease
sure at conclusion of test. sure change during test (Maximum minus Minimum). pressure change an increase or a decrease? I closed at (hour, date) 9:30 AM, 3-23-92 Total time on Production Gas Production		100 160 decrease
sure at conclusion of test sure change during test (Maximum minus Minimum) pressure change an increase or a decrease? I closed at (hour, date) 9:30 AM, 3-23-92 Total time on Production Gas Production Ing Test 0 bbls; Grav ; During Test 16		100 160 decrease
sure at conclusion of test sure change during test (Maximum minus Minimum) pressure change an increase or a decrease? I closed at (hour, date) 9:30 AM, 3-23-92 Total time on Production Gas Production Ing Test 0 bbls; Grav ; During Test 16		100 160 decrease
sure at conclusion of test		100 160 decrease
sure at conclusion of test		100 -160 decreases
sure change during test (Maximum minus Minimum). pressure change an increase or a decrease? I closed at (hour, date) 9:30 AM, 3-23-92 Production Gas Production ng Test: 0 bbls; Grav ; During Test 16 A Parks OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the information contained herein is true and completed to the best of my knowledge	90	100 -160 -decrease
OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the information contained herein is true and completed to the best of my knowledge EXXOT. Corp. P.O. Box 1600 Midland TX 79702 Operant Ordination Gas Production Froduction Gas Production 16 N OIL CO Date Approve	90	100 -160 —decreases IVISION 2'92
sure change during test (Maximum minus Minimum). I closed at (hour, date) 9:30 AM, 3-23-92 Production In g Test 0 bbls; Grav ; During Test 16 A Description OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the information contained herein is true and completed to the best of my knowledge Exxon Corp. P.O. Box 1600 Midland TX 79702 Operant	90	100 -160 —decreases IVISION 2'92
sure change during test (Maximum minus Minimum). I closed at (hour, date) 9:30 AM, 3-23-92 Production Ing Test: 0 bbls; Grav ; During Test 16 OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the information contained herein is true and completed to the best of my knowledge EXXOTI CORP. P.O. Bex 1600 Midland TX 79702 Operator Op	90	100 -160 decreases IVISION 2'92

INSTRUCTIONS FOR SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

- 1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such test shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.
- 2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.
- 3 The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized and for minimum of two hours thereafter, provided, however, that they need not remain shut-in more than 24 hours.
- 4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in. Such test shall be continued until the flowing wellhead pressure has become stabilized and for minimum of two hours thereafter, provided however, that the flow test need not continue for more than 24 hours.
- 5. Following completion of Flow Test No. 1, the well shall again be shut-in, in accordance with Paragraph 3 above.
- 6. Flow Test No. 2 shall be conducted even though no leak was indicated during Flow Test No. 1. Procedure for Flow Test No. 2 is to be the same as for Flow Test No. 1 except that the previously produced zone shall remain shut-in while the previously shut-in zone is produced.
- 7. All pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges, the accuracy of which must be checked with deadweight tester at least twice, once at the beginning and once at the end, of each flow test.
- 8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the appropriate District Office of the New Mexico Oil Conservation Division on Southeast New Mexico Packer Leakage Test Form Revised 1-1-89, together with the original pressure recording gauge charts with all the deadweight pressures which were taken indicated thereon. In lieu of filing the aforesaid charts, the operator may construct a pressure versus time curve from each zone of each test, indicating thereon all pressure changes which may be reflected by the gauge charts as well as all deadweight pressure readings which were taken. If the pressure curve is submitted, the original chart must be permanently filed in the operator's office. Form C-116 shall also accompany the Packer Leakage Test Form when the test period coincides with a gas-oil ratio test period.