

NEW MEXICO
OIL CONSERVATION COMMISSION
Back Pressure Data Sheet

Form C-122

HOODES OFFICE OCC

Pool: **Tubb** Date: **7-16-55**
 Company: **Continental Oil Co.** Lease: **Lockhart B-35** Well No. **15**
 County: **Lea** Sec. **35** Twp. **21S** Rge. **37E** Loc. **1980' from N and E lines**
7 ID casing set @ **6549** ; ID tubing _____ OD tubing set @ _____
 Pay zone from **6070** to **6226** ; Separator gas gr. **692** Barometer rdg. _____
 Reservoir temperature _____ ° Produced through: csg. **x** tbg. _____
 Average gas/liquid ratio during test: _____ Cu. ft. /bbl. gravity of liquid **41.3** ° API
 Size of meter run or prover: **4" meter run**

OBSERVED DATA

Wellhead shut-in pressure, P_w Casing **2054.2** Tubing _____ PSIA

Run No.	Orifice Size	Orifice x Line	Meter Pressures		Coefficient C Flg. tap x Pipe tap _____	Wellhead Pr.		Flowing Temp.	
			Static P_m Abs.	Diff. h_w		Casing P_{wc} Abs.	Tubing P_{wc} Abs.	Meter	Wellhead
1	2"	4"	480	5"	1091.55	1505.2			20°
2	2"	4"	480	16"	1076.03	855.2			30°
3	2"	4"	480	22"	1076.03	578.2			40°

DATA FOR PLOTTING CURVE

Run No.	Delivery Rate in MCF per 24 hours (Q)	$P_f^2 - P_s^2$ (thousands)
1	1932	2,621,230
2	2297	4,663,328
3	2694	5,296,257
4		
5		

Absolute Open Flow **2880** MCF

CERTIFICATION: I hereby swear or affirm that, to the best of my knowledge, the information given above is true and correct.

Name: **W. B. Allen** Position: **District Superintendent**

Company: **Continental Oil Co** Address: **Box 68, Eunice, N. M.**

Please plot curve on back

