

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Gulf Oil Corporation</u>			Lease <u>JF Janda (NCT-F)</u>		Well No. <u>7</u>	
Location of Well <u>Unit K</u>			Sec <u>4</u>		Twp <u>22</u>	
Rge <u>36</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>Talmat Yates 7 Rivers</u>			<u>Gas</u>	<u>Flow</u>	<u>Csg</u>	<u>—</u>
Lower Compl <u>Euv. Seven Rivers Queen So.</u>			<u>Oil</u>	<u>Pump</u>	<u>tbq</u>	<u>—</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 Am 3/25/85

Well opened at (hour, date): 9:00 Am 3/26/85

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>10</u>	<u>0</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>10</u>	<u>0</u>
Minimum pressure during test.....	<u>10</u>	<u>0</u>
Pressure at conclusion of test.....	<u>10</u>	<u>0</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>No chge</u>	<u>No chge</u>
Well closed at (hour, date): <u>9:00 Am 3/27/85</u>	Total Time On Production <u>24</u>	
Oil Production During Test: _____ bbls; Grav. _____	Gas Production During Test _____	MCF; GOR _____
Remarks <u>Lower zone not reg</u>		

FLOW TEST NO. 2

Well opened at (hour, date): 9:00 Am 3/28/85

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>10</u>	<u>0</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>10</u>	<u>0</u>
Minimum pressure during test.....	<u>10</u>	<u>0</u>
Pressure at conclusion of test.....	<u>10</u>	<u>0</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>No chge</u>	<u>No chge</u>
Well closed at (hour, date) <u>9:00 Am 3/29/85</u>	Total time on Production <u>24</u>	
Oil Production During Test: _____ bbls; Grav. _____	Gas Production During Test _____	MCF; GOR _____
REMARKS: _____		

I hereby certify that the information herein contained is true and complete to the best of my knowledge.

Approved: JUN 14 1985
Oil Conservation Division

By _____
ORIGINAL SIGNED BY EDDIE SEAY
OIL & GAS INSPECTOR

Title _____

Operator Gulf

By Ju Harbini

Title Well Tester

Date 5/13/85

RECEIVED

MAY 16 1985

U.S. HOUSE OF REPRESENTATIVES