

NEW MEXICO OIL CONSERVATION COMMISSION  
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Sinclair Oil & Gas Company				Lease State 157 "A"		Well No. 2	
Location of Well		Unit J	Sec 9	Twp 22S	Rge 36E	County Lea	
Name of Reservoir or Pool		Type of Prod (Oil or Gas)		Method of Prod Flow, Art Lift		Prod. Medium (Tbg or Csg)	
Upper Compl		Gas		Flow		Csg	
Lower Compl		Oil		Flow		Tbg	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 1:00 PM 10-18-65

Well opened at (hour, date): 11:30 AM 10-19-65	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....	X	
Pressure at beginning of test.....	520	270
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	520	280
Minimum pressure during test.....	440	270
Pressure at conclusion of test.....	440	280
Pressure change during test (Maximum minus Minimum).....	80	10
Was pressure change an increase or a decrease?.....	Decrease	Increase
Well closed at (hour, date): 9:30 AM 10-20-65	Total Time On Production 22 hrs.	
Oil Production	Gas Production	
During Test: 0 bbls; Grav. --	During Test 485 MCF; GOR --	
Remarks Results of tests indicate packer is separating the two zones properly.		

FLOW TEST NO. 2

Well opened at (hour, date): 11:00 AM 10-22-65	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....		X
Pressure at beginning of test.....	530	280
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	540	280
Minimum pressure during test.....	530	200
Pressure at conclusion of test.....	540	200
Pressure change during test (Maximum minus Minimum).....	10	80
Was pressure change an increase or a decrease?.....	Increase	Decrease
Well closed at (hour, date): 6:00 PM 10-22-65	Total time on Production 7 hrs.	
Oil Production	Gas Production	
During Test: 1 bbls; Grav. --	During Test 8 MCF; GOR 8000:1	
Remarks		

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

Approved NOV 10 1965 19  
New Mexico Oil Conservation Commission

Operator SINCLAIR OIL & GAS COMPANY

By [Signature] Title Superintendent

Title Date 11-2-65