

This form is used to
be used for reporting
packer leakage tests
in Northwest New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>CANOCO INC.</u>			Lease <u>Warren Unit Bl. 51</u> <u>WARREN UNIT Lease</u>			Well No. <u>59</u>	
Location of Well		Unit <u>L</u>	Sec <u>26</u>	Twp <u>20 S</u>	Rge <u>38 E</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>oil</u>	<u>art. lift</u>	<u>tbg.</u>	<u>4 1/2</u>	
Lower Compl			<u>oil</u>	<u>flow. lift</u>	<u>tbg.</u>	<u>16/64</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:00 AM 7-22-85

Well opened at (hour, date): 10:00 AM 7-23-85

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>70</u>	<u>60</u>
Stabilized? (Yes or No).....	<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....	<u>480</u>	<u>720</u>
Minimum pressure during test.....	<u>70</u>	<u>60</u>
Pressure at conclusion of test.....	<u>80</u>	<u>720</u>
Pressure change during test (Maximum minus Minimum).....	<u>410</u>	<u>660</u>
Was pressure change an increase or a decrease?.....	<u>INC.</u>	<u>INC.</u>

Well closed at (hour, date): 10:00 AM 7-24-85

Oil Production During Test: 4 bbls; Grav. _____; Gas Production During Test: 223 MCF; GOR 55,750

Remarks _____

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>10:00 AM 7-25-85</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>70</u>	<u>60</u>
Stabilized? (Yes or No).....	<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....	<u>480</u>	<u>720</u>
Minimum pressure during test.....	<u>70</u>	<u>60</u>
Pressure at conclusion of test.....	<u>80</u>	<u>720</u>
Pressure change during test (Maximum minus Minimum).....	<u>410</u>	<u>660</u>
Was pressure change an increase or a decrease?.....	<u>INC.</u>	<u>INC.</u>

Well closed at (hour, date): _____

Oil Production During Test: 4 bbls; Grav. _____; Gas Production During Test: 66 MCF; GOR 16,500

REMARKS: _____

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

Approved: AUG 14 1985 19 _____

Oil Conservation Division

By ORIGINAL SIGNED BY EDDIE SEAY

Title OIL & GAS INSPECTOR

Operator CANOCO INC.

By Don Caperton

Title Prod. Tech.

Date 7-30-85

100-1000

10-19 1985

100-1000