

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

INSTRUCTIONS ON REVERSE
SIDE

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Conoco Inc</u>			Lease <u>Sema Permian + Sema Burger</u>			Well No. <u>107</u>	
Location of Well	Unit <u>J</u>	Sec. <u>19</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>Skaggs Grayburg</u>		<u>OIL</u>	<u>Art Lift</u>	<u>TBG</u>	<u>NONE</u>	
Lower Compl	<u>Skaggs Paddock</u>		<u>OIL</u>	<u>Shut-IN</u>	<u>TBG</u>	<u>NONE</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 AM 3-4-91

Well opened at (hour, date): 8:30 AM 3-5-91

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>103</u>	<u>65</u>
Stabilized? (Yes or No).....	<u>YES</u>	<u>YES</u>
Maximum pressure during test.....	<u>103</u>	<u>85</u>
Minimum pressure during test.....	<u>38</u>	<u>65</u>
Pressure at conclusion of test.....	<u>38</u>	<u>85</u>
Pressure change during test (Maximum minus Minimum).....	<u>65</u>	<u>20</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>INCREASE</u>
Well closed at (hour, date): <u>11:30 AM 3-6-91</u>	Total Time On Production <u>27 HRS</u>	
Oil Production During Test: <u>14</u> bbls; Grav. _____	Gas Production During Test <u>26</u> MCF; GOR <u>1857</u>	

Remarks Skaggs Paddock shut in No Flow line to well head.

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): _____		
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		
Maximum pressure during test.....		
Minimum pressure during test.....		
Pressure at conclusion of test.....		
Pressure change during test (Maximum minus Minimum).....		
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date) _____	Total time on Production _____	
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	

Remarks _____

OPERATOR CERTIFICATE OF COMPLIANCE

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

Eugene LaCour
Operator

CONOCO INC
Signature

Eugene LaCour - Production SPEC.
Printed Name Title

3-11-91
Date

393-0138
Telephone No.

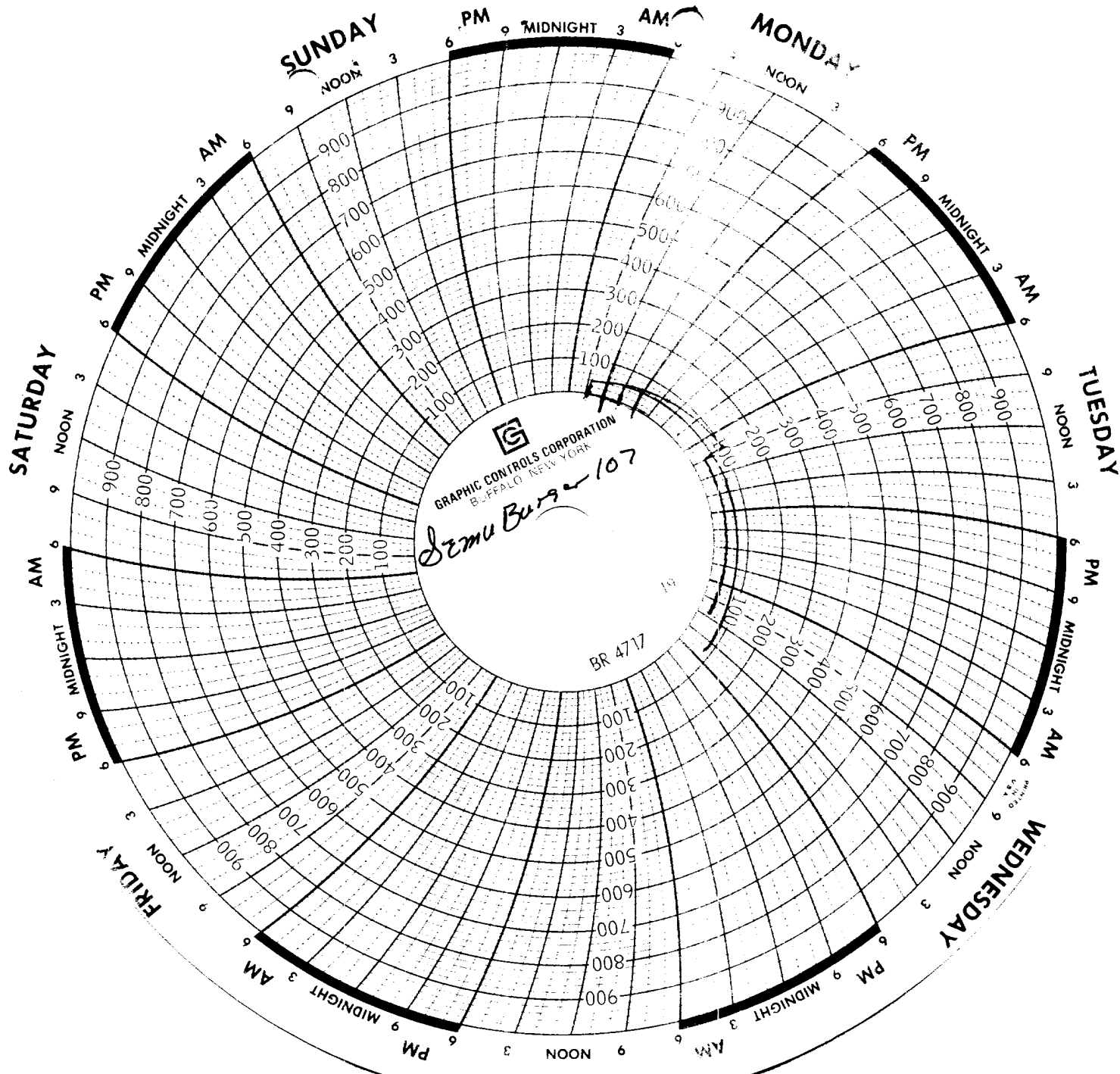
OIL CONSERVATION DIVISION

APR 11 1991

Date Approved _____

By _____

Title _____



RECEIVED
MAR 25 1991