

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Gulf Oil Corporation			Lease J. P. Janda (NCT-B)			Well No. 4		
Location of Well	Unit 0	Sec 32	Twp 21S	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)	Choke Size		
Upper Compl	Jalmat		Oil	Flow	Tbg.	40/64"		
Lower Compl	Burice South		Oil	Pump	Tbg.	2" W0		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 a.m., 9-12-66

Well opened at (hour, date): <u>9:30 a.m., 9-13-66</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	338	98
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	342	98
Minimum pressure during test.....	338	27
Pressure at conclusion of test.....	342	27
Pressure change during test (Maximum minus Minimum).....	4	71
Was pressure change an increase or a decrease?.....	Incr.	Decr.
Well closed at (hour, date): <u>9:30 a.m., 9-14-66</u>	Total Time On Production 24 hrs	
Oil Production During Test: 8 bbls; Grav. 33.3	Gas Production During Test 113.0	MCF; GOR 14,125

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): <u>9:30 a.m., 9-15-66</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	344	97
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	344	106
Minimum pressure during test.....	5	97
Pressure at conclusion of test.....	40	106
Pressure change during test (Maximum minus Minimum).....	339	9
Was pressure change an increase or a decrease?.....	Decr.	Incr.
Well closed at (hour, date): <u>9:30 a.m., 9-16-66</u>	Total time on Production 24 hrs	
Oil Production During Test: 5 bbls; Grav. 32.7	Gas Production During Test 282.0	MCF; GOR 56,400

Remarks _____

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

Approved _____ 19____
New Mexico Oil Conservation Commission

Operator Gulf Oil Corporation

By J. W. Davis

J. W. Davis

By _____
Title _____

Title Well Tester

Date 9-19-66

5. Following completion of the above, the contractor shall submit a report in accordance with the following:

6. Flow Test No. _____ shall be conducted during Flow Test No. _____ as for Flow Test No. _____ main shut-in while pressure is being produced.
7. All pressures being measured and recorded which must be changed at beginning and end of each flow test.
8. The results of each flow test shall be reported within 15 days after completion of the appropriate flow test mission on Southeast Island together with the deadweight pressure, time curve for each flow test, changes which may be required, weight pressure recommended, etc., submitted by the original testing office. Form No. _____ when the test person

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