Submit 3 Copies to Appropriate Dist. Office

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

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

State of New Mexico Minerals and Natural Resources Department

## **OIL CONSERVATION DIVISION**

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 Revised 1-1-89

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 A	PACHE CORPOR	ATION		Lease SOUTHLAND RO	DYALTY A	Well No. #1-G
Location	Unit G	Sec. 9	Twp 2	1S   Rge   37E	County	ea
of Well		ervoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tbg. or Csg)	Choke Size
Upper	DRINKARD	civoit of Pool	OIL	ART LIFT	TBG	
Compl Lower	WANTZ ABO		GAS	FLOW	TBG	
Compl	WANTE ADO			TEST NO. 1	1 190	
		/ . • =				
	s shut-in at (hour,		pm 3-31-99		Upper	Lower
Well opened at (hour, date): 12:30 pm. 4-1-99 Completion						Completion
Indicate by	y (X) the zone pr	oducing				X
Pressure at beginning of test.						200
Stabilized? (Yes or No)						YES
Maximum pressure during test						200
Minimum pressure during test						20
						20
Pressure at conclusion of test						
Pressure change during test (Maximum minus Minimum)						180
Was press	ure change an inci	rease or a decrease?		Total Time On		Decrease
		4:15 pm 4	Gas Producti	Production		
Oil Production During Te		ols; Grav		1 4 4	MCF; GOR	
Remarks_		٠٠٠ .				
			FLOW	TEST NO. 2	Upper	Lower
Well opened at (hour, date): 4:30 pm 4-1-99  Completion  Indicate by (X) the zone producing						Completion
Indicate by	y (X) the zone	producing	••••••••	•••••	X	
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?  Decrease						
		12:30 am 4-2		Total time on		
Oil produc			Gas Producti	on Production		
During Te	st: <u>33</u> b	bls; Grav	_; During Test_	290 M	ICF; GOR	
Remarks						
OPFI	RATOR CERT	IFICATE OF CON	ADI LANCE			
I her	reby certify that the	information contained h		MP OIL COI	NSERVATION D	IVISION
and	APACHE CO	st of my knowledge RPORATION		11		_
Oper	rator 11	ζ Λ <sub>Λ</sub>			d 5-13-	
Sign	nature Win	Shamole	и	_    By	is. Stagen ay comes Distagen Somethis	MANUL PARACE
SYL	VIA SHOEMAKE	R CLE	ERK	- 11	•	
1	ted Name	(A) 1 (15	Title	1100		
a d	1-21-99	015/183	1054	II		

