

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

NEW MEXICO OIL CONSERVATION COMMISSION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator TEXACO INC.			Lease MIDDLE WEATHERS			Well No. 1	
Location of Well	Unit F	Sec 17	Twp 21	Rge 37	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	PENROSE SKELLY		* OIL	ART LIFT	TBG	-	
Lower Compl	DRINKARD		OIL	FLOW	TBG	2 1/4	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 7:00 AM 2-2-76

Well opened at (hour, date): 7:00 AM 2-2-76

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	420	700
Stabilized? (Yes or No).....	Yes	No
Maximum pressure during test.....	420	700
Minimum pressure during test.....	420	30
Pressure at conclusion of test.....	420	30
Pressure change during test (Maximum minus Minimum).....	0	-670
Was pressure change an increase or a decrease?.....	~	DECREASE

Well closed at (hour, date): 2:00 PM 2-3-76 Total Time On Production 7 HOURS

Oil Production During Test: 2 bbls; Grav. 37.4; Gas Production During Test 30 MCF; GOR 15.000

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): _____	Upper Completion	Lower Completion
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 * PENROSE SKELLY IS TEMPORARILY ABANDON

ANNUAL ECNE SEGREGATION TEST

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

Approved 376 19 44
New Mexico Oil Conservation Commission

Operator TEXACO INC.
By [Signature]
Title Asst. Dist. SUPERINTENDENT
Date 2-19-76

By _____
Title _____

RECEIVED

1952

CONSTRUCTION CORP.
1952