

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

SOUTHERN NEW MEXICO PACKER LEAKAGE TEST

Operator <u>CONOCO INC.</u>				Lease <u>STATE F-1</u>		Well No. <u>9</u>	
Location of Well	Unit <u>U</u>	Sec <u>1</u>	Twp <u>21 S</u>	Rge <u>36 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>HARRY BLINERY</u>		<u>OIL</u>	<u>ART LIFT</u>	<u>TBG</u>	<u>OPEN</u>	
Lower compl	<u>HARRY-Subb-Drunkard</u>		<u>OIL</u>	<u>ART LIFT</u>	<u>TBG</u>	<u>OPEN</u>	
	<u>DRINKARD R-8626 4/1/88</u>						

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9/14/87 1:00

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9/15/87</u>		
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>50</u>	<u>50</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>1000</u>	<u>550</u>
Minimum pressure during test.....	<u>100</u>	<u>100</u>
Pressure at conclusion of test.....	<u>100</u>	<u>100</u>
Pressure change during test (Maximum minus Minimum).....	<u>900</u>	<u>450</u>
Was pressure change an increase or a decrease?.....	<u>INC.</u>	<u>INC.</u>
Well closed at (hour, date): <u>9/16/87</u>	Total Time On Production <u>24 HRS</u>	
Oil Production During Test: <u>4</u> bbls; Grav. _____; Gas Production During Test <u>188</u> MCF; GOR <u>47000</u>		
Remarks _____		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9/17/87</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>50</u>	<u>50</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>1000</u>	<u>550</u>
Minimum pressure during test.....	<u>100</u>	<u>100</u>
Pressure at conclusion of test.....	<u>100</u>	<u>100</u>
Pressure change during test (Maximum minus Minimum).....	<u>900</u>	<u>450</u>
Was pressure change an increase or a decrease?.....	<u>INC.</u>	<u>INC.</u>
Well closed at (hour, date): <u>9/18/87</u>	Total time on Production <u>24 HRS</u>	
Oil Production During Test: <u>10</u> bbls; Grav. _____; Gas Production During Test <u>150</u> MCF; GOR <u>15,000</u>		
REMARKS: _____		

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

Approved: SEP 30 1987 19
Oil Conservation Division

By Eddie W. Seay
Oil & Gas Inspector

Operator CONOCO
By Lina Perez
Title Prod. Tech
Date 9/19/87

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