

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

OIL CONSERVATION DIVISION

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

INSTRUCTIONS ON REVERSE
SIDE

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

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

| | | | | | | | | |
|---|---------------------------|------------|-------------------------------|-----------------------------------|-------------------------------|------------|--|--|
| Operator Mobil Producing TX & NM, Inc. | | | Lease Brunson Argo | | | Well No. 6 | | |
| Location of Well | Unit E | Sec. 10 | Twsp 22-S | Rge 37-E | 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 | Blinebky | | Gas | Flow | Tbg | Full | | |
| Lower Compl | Drinkard | | Gas | Flow | Tbg | Full | | |

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 am 3-27-89

Well opened at (hour, date): 9:00 am 3-28-89

| | Upper Completion | Lower Completion |
|--|----------------------------------|---------------------|
| Indicate by (X) the zone producing..... | | X |
| Pressure at beginning of test..... | 190 | 360 |
| Stabilized? (Yes or No)..... | Yes | Yes |
| Maximum pressure during test..... | 190 | 360 |
| Minimum pressure during test..... | 190 | 40 |
| Pressure at conclusion of test..... | 190 | 40 |
| Pressure change during test (Maximum minus Minimum)..... | 0 | 320 |
| Was pressure change an increase or a decrease?..... | No change | decrease |
| Well closed at (hour, date): 9:00 am 3-29-89 | Total Time On Production 24 | |
| Oil Production During Test: 0 bbls; Grav. _____ | Gas Production During Test 11 | MCF; GOR _____ |

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): 9:00 am 3-30-89

| | Upper Completion | Lower Completion |
|--|-------------------------------------|---------------------|
| Indicate by (X) the zone producing..... | X | |
| Pressure at beginning of test..... | 190 | 190 |
| Stabilized? (Yes or No)..... | Yes | Yes |
| Maximum pressure during test..... | 190 | 280 |
| Minimum pressure during test..... | 25 | 190 |
| Pressure at conclusion of test..... | 25 | 280 |
| Pressure change during test (Maximum minus Minimum)..... | 165 | 90 |
| Was pressure change an increase or a decrease?..... | decrease | increase |
| Well closed at (hour, date) Left Open | Total time on Production 24 hrs. | |
| Oil production During Test: 0 bbls; Grav. _____ | Gas Production During Test 79 | 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

Mobil Producing TX & NM Inc.

Operator
for D. G. Clay

Printed Name
3-31-89

Title
(505) 393-3315
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 18 1989

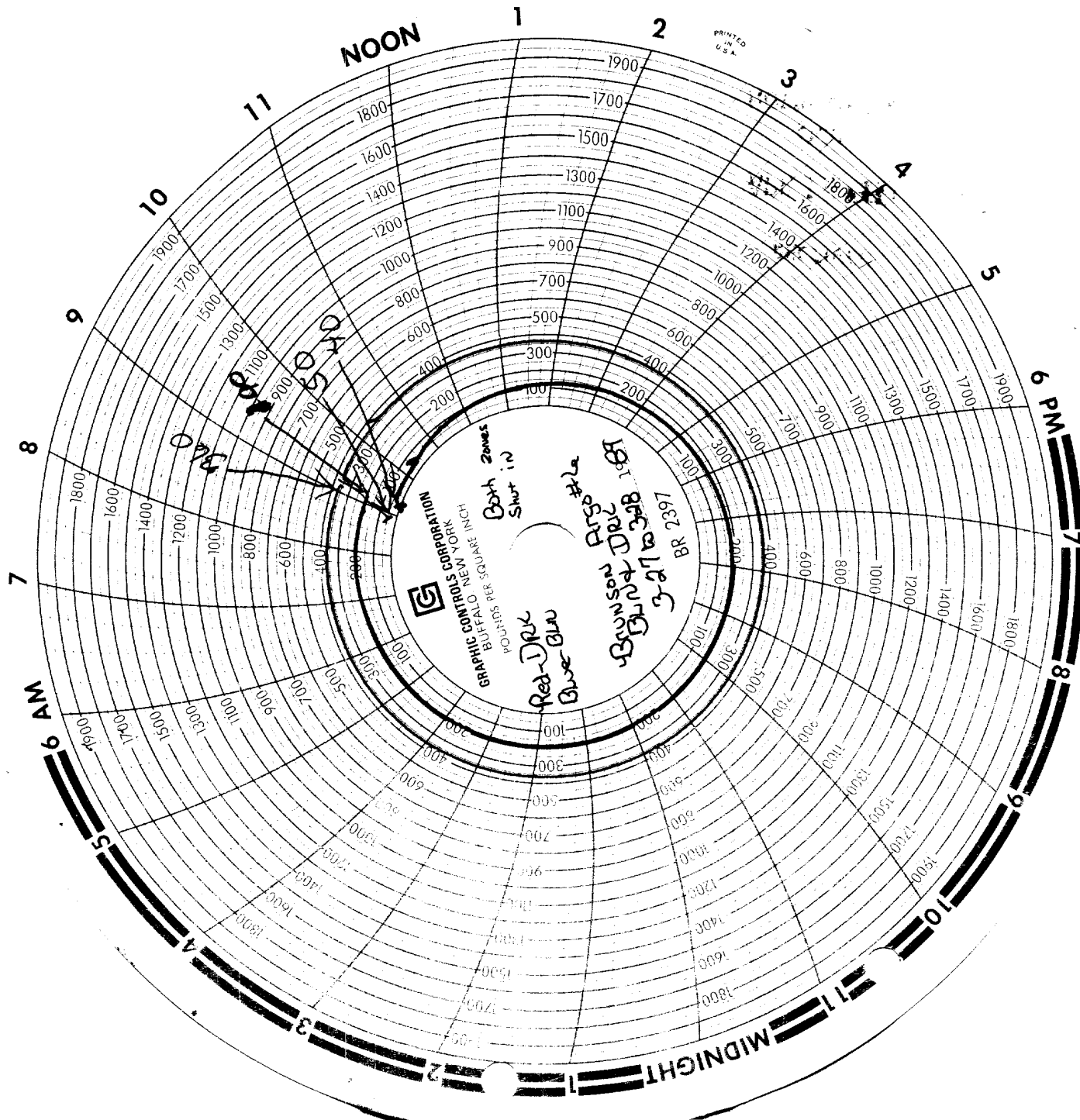
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title _____

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-28-2001 BY 60322 UCBAW

APR 18 1989

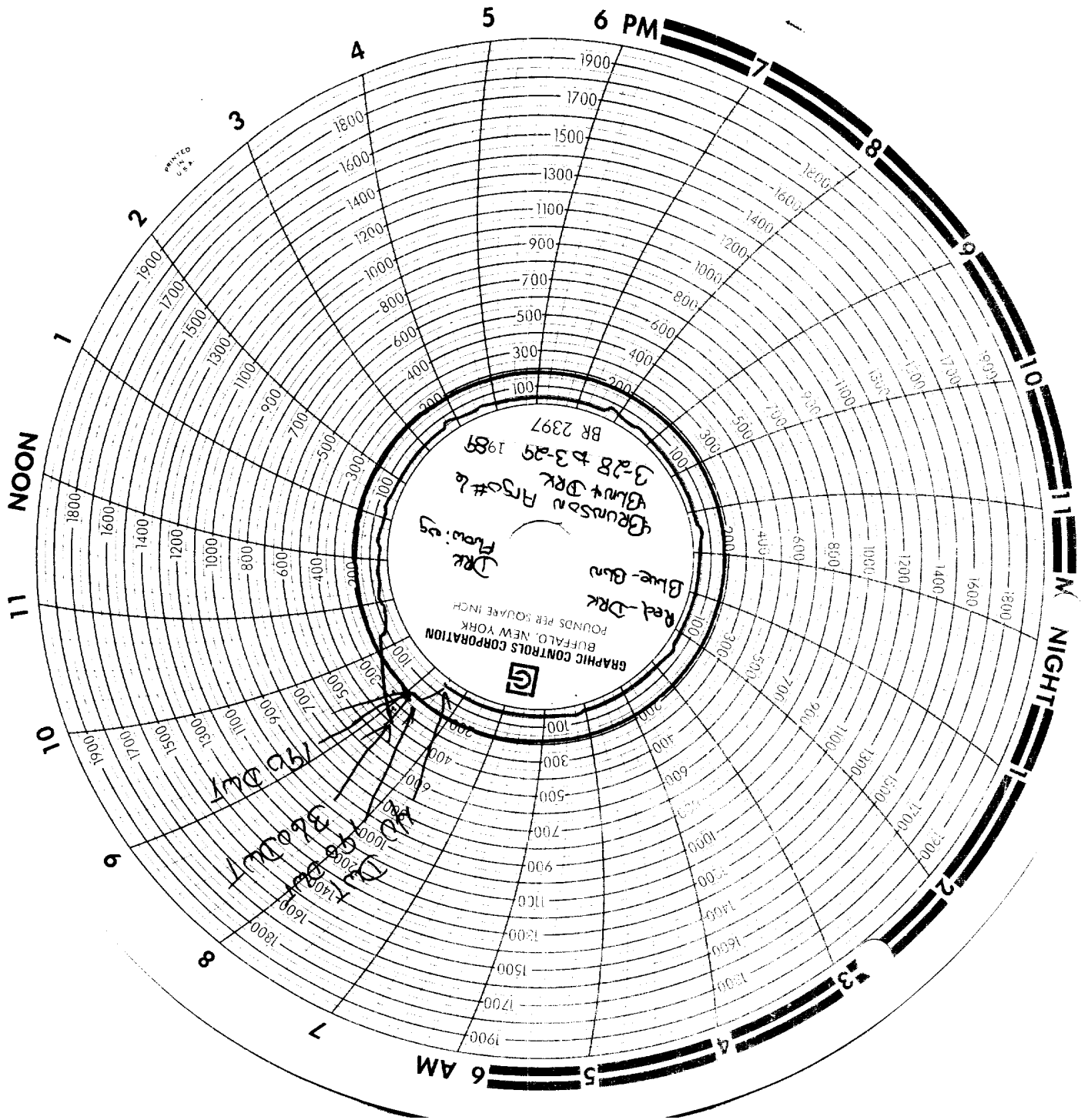
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HOBBS OFFICE**



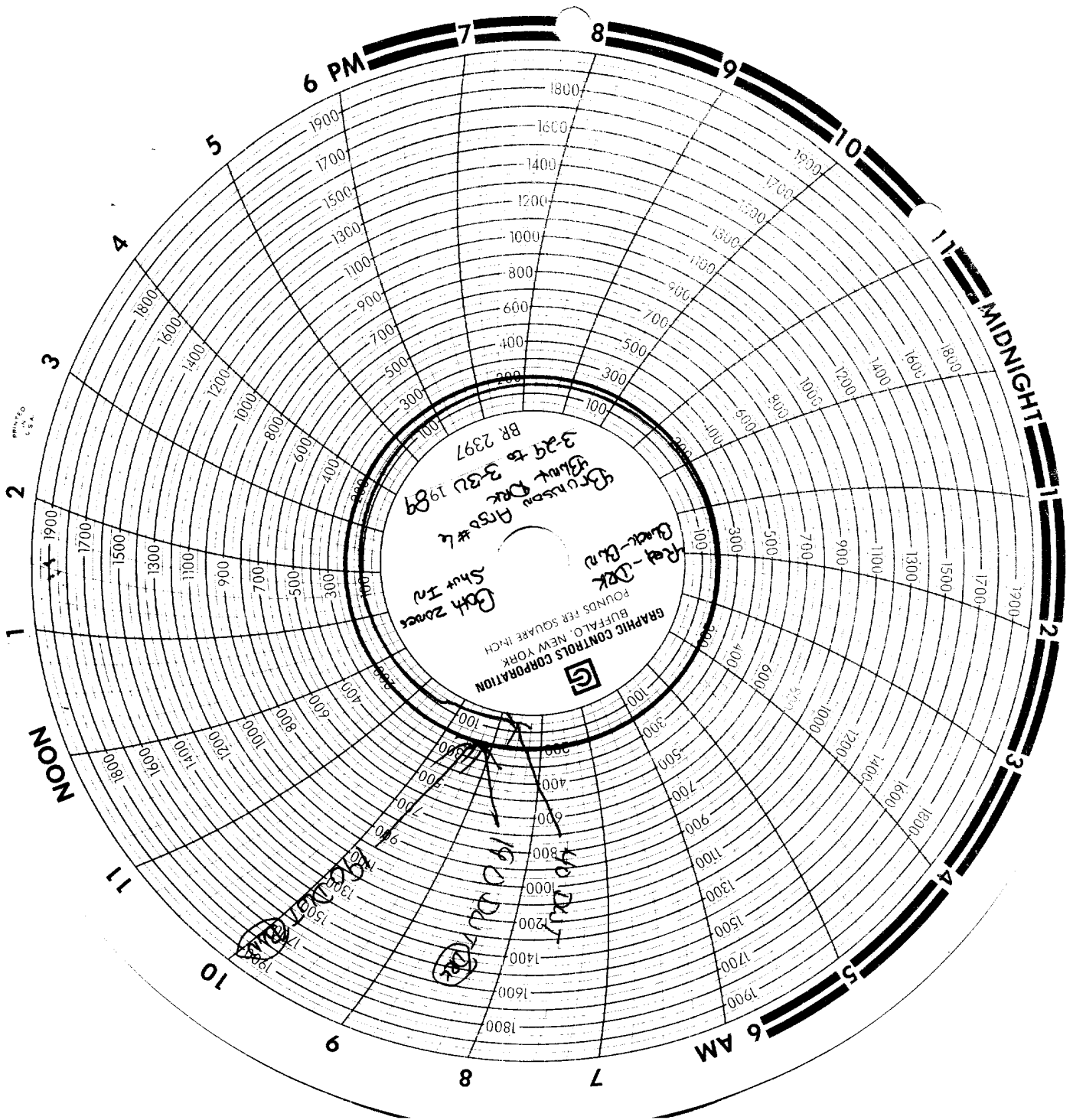
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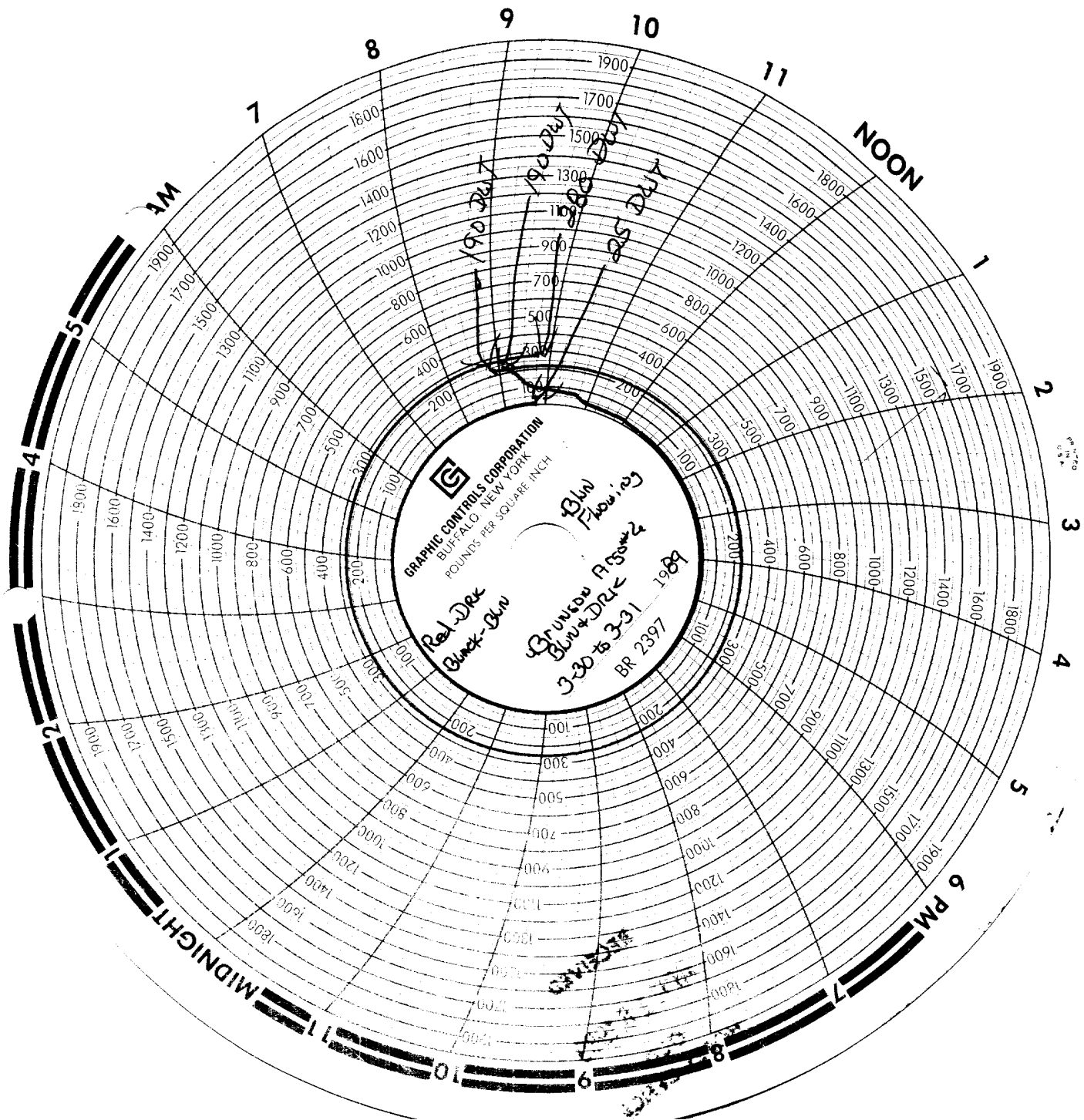


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