Date

## State of New Mexico .rgy, Minerals and Natural Resources Dep. .en.

INSTRUCTIONS ON REVERSE

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

SIDE

## Revised 1-1-89

## DISTRICT | P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Mobil Producing TX & NM Inc.	1	S.E. Long		Well No.
Location Unit Sec. of Well I 11	Twp 22S	Rge 37E	County	
Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tog. or Csg)	Choke Size
Upper   Compl Drinkard	Gas	Flow	Tbg	Full
Compl Wantz Granite Wash	Oil	Flow	Tbg	Full
	FLOW T	EST NO. 1		
Both zones shut-in at (hour, date): 7:	00 AM 04-20-9			
Well opened at (hour, date): 7:00 AM 04-21-92			Upper	Lower
···			Completion	Completion
Indicate by (X) the zone producing				<u>x</u>
Pressure at beginning of test				320
Stabilized? (Yes or No)	••••••	•••••	Yes	Yes
Maximum pressure during test			320	320
Minimum pressure during test.			320	25
Pressure at conclusion of test				25
Pressure change during test (Maximum minus Mi				
				295
Was pressure change an increase or a decrease?		Total Time On		-Decrease
Well closed at (hour, date): 7:00 AM 04-2 Dil Production				
Ouring Test: 1 bbls; Grav. 40.3	During Test	17	MCF; GOR	17000
lemarks				
/ell opened at (hour, date): 7:00 AM 04-23-92			Upper	Lower
			Completion	Completion
ndicate by (X) the zone producing				<del></del>
ressure at beginning of test				260
tabilized? (Yes or No)	*******************	••••••	Yes	Yes
Maximum pressure during test			320	320
finimum pressure during test			70	260
ressure at conclusion of test				320
ressure change during test (Maximum minus Mini				
			•	60
as pressure change an increase or a decrease?	••••••••••	Total time on	Decrease	Increase
'ell closed at (hour, date) Left Open il production	Gas Production	Production	24 hours	
etring Test: 0 bbls; Grav	; During Test	101 MC	F; GOR	
emarks				
OPERATOR GENTRES				
OPERATOR CERTIFICATE OF COM  I hereby certify that the information contained here	PLIANCE	S OII CONS	CEDVATION D	\
and completed to the best of my knowledge			SERVATION DIVISION	
Mobil Producing TX & NM Inc.*		Date Approved	MAY 12'	92
Operator *Mobil Exploration & Producing US Inc.  Ry				
Signature	Took	Бу	SAS ELECTRICATION OF THE PROPERTY OF THE PROPE	708
<u></u>	ieco II			
Printed Name	Title	Title		

Telephone No.