

DISTRICT I
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

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 <u>John H. Hendrix, Corp.</u>			Lease <u>Boyd</u>			Well No. <u>29</u>		
Location of Well	Unit <u>H</u>	Sec. <u>23</u>	Twp <u>22</u>	Rge <u>37</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>Blinobny</u>		<u>Oil & Gas</u>	<u>Pump</u>	<u>Tbg. & Csg.</u>	<u>64/64</u>		
Lower Compl	<u>Drinkand</u>		<u>Gas</u>	<u>None</u>	<u>---</u>	<u>---</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 6:00 AM 5/26/91

Well opened at (hour, date): 2:00 PM 5/26/91

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>200</u>	
Stabilized? (Yes or No).....	<u>no</u>	
Maximum pressure during test.....	<u>200</u>	
Minimum pressure during test.....	<u>55</u>	
Pressure at conclusion of test.....	<u>55</u>	
Pressure change during test (Maximum minus Minimum).....	<u>145</u>	
Was pressure change an increase or a decrease?.....	<u>Decrease</u>	
Well closed at (hour, date): <u>10:00 PM 5/26/91</u>	Total Time On Production <u>8 hours</u>	
Oil Production During Test: <u>4</u> bbls; Grav. <u>42</u>	Gas Production During Test <u>30 MCF</u>	MCF; GOR <u>7,500</u>
Remarks <u>No evidence of communication-Drinkand is TA below plug</u>		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date):		<u>X</u>
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		<u>See Below</u>
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 <u>Drinkand zone is TA</u>		

OPERATOR CERTIFICATE OF COMPLIANCE

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

John H. Hendrix, Corporation

Operator

Signature

Marvin Bunnows-Production Supt.

Printed Name

Title

5-28-91

394-2649

Date

Telephone No.

DP

OIL CONSERVATION DIVISION

Date Approved

JUN 5 1991

By

Pat Kautz
Geologist

Title



