

NEW MEXICO OIL CONSERVATION COMMISSION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator TEXACO INC.			Lease A.H. BLINEBRY FEDERAL NCT-1			Well No. 6	
Location of Well	Unit B	Sec 19	Twp 22S	Rge 38E	County LEA		
Name of Reservoir or Pool			Type of Prod (Oil or Gas)	Method of Prod Flow, Art. Lift	Prod. Medium (Thg or Gas)	Choke Size	
Upper Compl	BLINEBRY		GAS	FLOW	TBG.	1"	
Lower Compl	DRINKARD		OIL	FLOW	TBG.	20/64	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8:00 AM 2-3-86

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>8:00 AM 2-4-86</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>240</u>	<u>525</u>
Stabilized? (Yes or No).....	<u>No</u>	<u>No</u>
Maximum pressure during test.....	<u>240</u>	<u>540</u>
Minimum pressure during test.....	<u>50</u>	<u>525</u>
Pressure at conclusion of test.....	<u>55</u>	<u>540</u>
Pressure change during test (Maximum minus Minimum).....	<u>-190</u>	<u>+15</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>INCREASE</u>
Well closed at (hour, date): <u>3:00 PM 2-4-86</u>	Total Time On Production <u>7 HRS.</u>	
Oil Production	Gas Production	
During Test: <u>1</u> bbls; Grav. <u>37.7</u>	During Test <u>28</u>	MCF; GOR <u>28,000</u>
Remarks _____		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>8:00 AM 2-5-86</u>		
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>230</u>	<u>540</u>
Stabilized? (Yes or No).....	<u>No</u>	<u>Yes</u>
Maximum pressure during test.....	<u>240</u>	<u>540</u>
Minimum pressure during test.....	<u>230</u>	<u>40</u>
Pressure at conclusion of test.....	<u>240</u>	<u>40</u>
Pressure change during test (Maximum minus Minimum).....	<u>+10</u>	<u>-500</u>
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>DECREASE</u>
Well closed at (hour, date): <u>3:00 PM 2-5-86</u>	Total time on Production <u>7 HRS.</u>	
Oil Production	Gas Production	
During Test: <u>2</u> bbls; Grav. <u>37.7</u>	During Test <u>18</u>	MCF; GOR <u>9000</u>
Remarks _____		

ANNUAL ZONE SEGREGATION TEST

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

Approved FEB 24 1986 19
New Mexico Oil Conservation Commission

Operator TEXACO INC.
By W.B. Cook

By ORIGINAL SIGNED BY JOEY TAYLOR
Title DISTRICT SUPERVISOR

Title District Operations Manager
Date February 12, 1986

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FEB 20 1986
C.C.D.
HOBBS OFFICE