

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>Texasco Inc.</u>				Lease <u>A.H. Blinberry Fed. (NCT-1)</u>		Well No. <u>25</u>	
Location of Well	Unit	Sec	Tw	Rge	County		
	<u>N</u>	<u>28</u>	<u>22</u>	<u>38</u>	<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>Tubb</u>		<u>oil</u>	<u>Art. Lift</u>	<u>Csg. (2 7/8)</u>	<u>—</u>	
Lower Compl	<u>Drinkard</u>		<u>oil</u>	<u>Art. Lift</u>	<u>Csg. (2 7/8)</u>	<u>—</u>	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 2:30 PM 5-3-68

Well opened at (hour, date): 2:30 PM 5-4-68 Upper Completion Lower Completion

Indicate by (X) the zone producing..... X

Pressure at beginning of test.....psi..... 210 360

Stabilized? (Yes or No)..... NO NO

Maximum pressure during test.....psi..... 210 420

Minimum pressure during test.....psi..... 10 360

Pressure at conclusion of test.....psi..... 10 420

Pressure change during test (Maximum minus Minimum).....psi..... 200 60

Was pressure change an increase or a decrease?..... decrease increase

Well closed at (hour, date): 1:30 PM 5-5-68 Total Time On Production 23 hrs.

Oil Production Gas Production

During Test: 4 bbls; Grav. 39.0 ; During Test 8 MCF; GOR 2000

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date): 1:30 PM 5-6-68 Upper Completion Lower Completion

Indicate by (X) the zone producing..... X

Pressure at beginning of test.....psi..... 300 450

Stabilized? (Yes or No)..... NO NO

Maximum pressure during test.....psi..... 300 450

Minimum pressure during test.....psi..... 300 75

Pressure at conclusion of test.....psi..... 300 80

Pressure change during test (Maximum minus Minimum).....psi..... 0 375

Was pressure change an increase or a decrease?..... — decrease

Well closed at (hour, date): 8:00 AM 5-7-68 Total time on Production 18 hrs. 30 min.

Oil Production Gas Production

During Test: 18 bbls; Grav. 39.9 ; During Test 52 MCF; GOR 2889

Remarks _____

Annual Zone Segregation Test

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

Approved _____ 19 _____
New Mexico Oil Conservation Commission

Operator Texasco Inc.
By [Signature]
Title Asst. Dist. Supt.
Date 5-17-68