Submit 3 Copies to Appropriate Dist. Office

## $\label{eq:state} State \ of \ New \ Mexico$ $E_{a \leftarrow a} gy, \ Minerals \ and \ Natural \ Resources \ Department$

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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 Revised 1-1-89

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

John H. Hendrix Corporatio	n Twp	Danglade Rge	County	2
ocation Unit A Sec. 24	22	37	Le	Choke Size
Name of Reservoir or Pool	Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Tbg. ôr Csg)	Choke Size
pper Blinebry	Oil & Gas	Flow	Csg	20/64
ompl brunson Drk. Abo So	. 0i1	Pump	Tbq	64/64
ompl Brunson Drk. Abo So	FLOW TES	_		
6·00 A				
Both zones shut-in at (hour, date): 6:00 AM 3/04/00			Upper	Lower Completion
Well opened at (hour, date): 12:00 PM 3/04/00			Completion X	Completion
ndicate by (X) the zone producing				
Pressure at beginning of test			200	40
tabilized? (Yes or No)		••••••	yes	yes
faximum pressure during test			200	60
			70	40
Minimum pressure during test			7.0	60
Pressure at conclusion of test				20
Pressure change during test (Maximum minus Minimum)				Increase
Vas pressure change an increase or a decrease		Total Time On		
Vell closed at (hour, date): 6:00 PM 3	Gas Production		6 hours	
During Test: $\frac{1}{2}$ bbls; Grav. $\frac{42}{}$	During Test	30	MCF; GOR6	0,000
emarks No evidence of comm	nunication			
Vell opened at (hour, date): 6:00 AM 3	3/05/00 FLOW TE	ST NO. 2	Upper Completion	Lower Completion
ndicate by (X) the zone producing	•••••••	•••••		X
ressure at beginning of test		•••••	260	80
Stabilized? (Yes or No)			yes	yes
Maximum pressure during test		290	80	
Minimum pressure during test				40_
ressure at conclusion of test				40
				40
ressure change during test (Maximum minus				Decreas
Vas pressure change an increase or a decrease		Total time on		necreasi
Vell closed at (hour, date) 12:00 PM C	Gas Production		hours	
Ouring Test: 5 bbls; Grav. 41	; During Test10	0 <u>M</u>	CF; GOR_500_	
Juling Test. 5 Bols, Grav. 12				

I hereby certify that the information contained herein is true and completed to the best of my knowledge		
John H. Hendrix Cor	poration	ַ
Operator Marcus Few	roeve	    E
Signature Marvin Burrows-Prod	uction Supt.	   T
Printed Name 3-30-00	Title 394-2649	

Telephone No.

Date

M OIL CONSERVA	TION DIVISION
Date Approved	. *
Ву	
Title	