Submit 3 Copies to Appropriate Dist. Office

P.O. Box 1980, Hobbs, NM 88240

DISTRICT I

DISTRICT II

Date

State of \*exico

E gy, Minerals and Natural Resources Departmen

Revised 1-1-89

INSTRUCTIONS ON REVERSE

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

## P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

OIL CONSERVATION DIVISION

## SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Johi	n H. Hendrix Co	rporatio	n	Lease Cossatot C		
Location of Well	Unit O	Sec. 24	Twp 22	Rge 37	County Lea	1
	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	Brunson Drk. A	Abo So.	Oi1	Flow	Csg	24/64
Lower Compl	Wantz Granite	Wash	Oi1	Pump	Tbg	Open

## FLOW TEST NO 1

	ILOT IVO. I			
Both zones shut-in at (hour, date): 6:00 AM 4/7/01				
Well opened at (hour, date): 12:00 PM 4/7/01	Upper Completion	Lower Completion		
Indicate by ( X ) the zone producing				
Pressure at beginning of test			40	
Stabilized? (Yes or No)			yes	
Maximum pressure during test		250	70	
Minimum pressure during test		60	40	
Pressure at conclusion of test			70	
Pressure change during test (Maximum minus Minimum)	•••••••	190	30	
Was pressure change an increase or a decrease?	Total Time On	Decrease	Increase	
Well closed at (hour, date): 6:00 PM 4/7/01 Oil Production Gas Productio		6 hours		
During Test: 0 bbls; Grav. – During Test	<sup>"</sup> 40	MCF; GOR 40,000		
Remarks No evidence of communication				
Well opened at (hour, date): 6:00 AM 4/8/01 FLOW T	Upper Completion	Lower Completion		
Indicate by ( X ) the zone producing	•••••		X	
Pressure at beginning of test		320	105	
Stabilized? (Yes or No)	•••••••••••••••••••••••••••••••••••••••	yes	yes	
Maximum pressure during test		380	105	
Minimum pressure during test		320	40	
Pressure at conclusion of test	•••••	380	40	
Pressure change during test (Maximum minus Minimum)	•••••	60	65	
Was pressure change an increase or a decrease?		_Increase	Decrease	
Well closed at (hour, date) 12:00 PM 4/8/01	Total time on Production 6 ho	urs		
Dil production Gas Production During Test: 2 bbls; Grav. 42; During Test	1			
Remarks No evidence of communication	,			
OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the information contained herein is true and completed to the best of my knowledge	M POIL CON	SERVATION [		
John H. Hendrix Corporation	Date Approved MAY 0 4 2001			
Manual of marcows	By	Oisty.		
Signature Marvin Burrows-Production Supt.	Title			
Printed Name         Title           5-1-01         394-2649				

Telephone No.

Colon San Colon Co

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