ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

Revised 10/1/78

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

SOUTH[illegible]T NEW MEXICO PACKER LEAKAGE TE

Operator	Lease	Well No.
Gulf Oil Corporation	Vivian	8

Location of Well	Unit	Sec	Twp	Rge	County
	D	30	22	38	Lea

	Name of Reservoir or Pool	Type of Prod (Oil or Gas)	Method of Prod Flow, Art. Lift	Prod. Medium (Tbg or Cag)	Choke Size
Upper Compl	D Rinkard	Gas	Flow	Tbg	-
Lower Compl	Wantz Granite Wash	Oil	Pump	Tbg	-

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 Am 4/22/85

	Upper Completion	Lower Completion
Well opened at (hour, date): 9:30 Am 4/23/85		
Indicate by (X) the zone producing		X
Pressure at beginning of test	288	21
Stabilized? (Yes or No)	yes	yes
Maximum pressure during test	293	24
Minimum pressure during test	288	21
Pressure at conclusion of test	293	24
Pressure change during test (Maximum minus Minimum)	+5	+3
Was pressure change an increase or a decrease?	INCR.	INCREASE

Well closed at (hour, date): 9:30 Am 4/24/85 Total Time On Production 24

Oil Production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ MCF; GOR _____

Remarks _____

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): 9:30 Am 4/25/85		
Indicate by (X) the zone producing	X	
Pressure at beginning of test	307	24
Stabilized? (Yes or No)	yes	yes
Maximum pressure during test	307	24
Minimum pressure during test	62	24
Pressure at conclusion of test	62	24
Pressure change during test (Maximum minus Minimum)	-245	0
Was pressure change an increase or a decrease?	Decrease	No chge

Well closed at (hour, date) 9:30 Am 4/26/85 Total time on Production 24

Oil Production During Test: _____ bbls; Grav. _____; Gas Production During Test _____ MCF; GOR _____

REMARKS: _____

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

Approved: JUN 14 1985 19

Oil Conservation Division

By ORIGINAL SIGNED BY ROY L. HAY

Title _____

Date _____

Operator Gulf

By [signature]

Title Area Engineer

Date