

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>AMOCO</u>		Lease <u>STATE FQ GAS COMM</u>			Well No. <u>1</u>	
Location of Well	Unit <u>N</u>	Sec. <u>26</u>	Twp <u>33</u>	Rge <u>34</u>	County <u>LEA</u>	
Name of Reservoir or Pool		Type of Prod. (Oil or Gas)	Method of Prod. Flow, Art Lift	Prod. Medium (Lbg. or Csg)	Choke Size	
Upper Compl	<u>ANTELOPE RIDGE</u> <u>ATOKA</u>	<u>GAS</u>	<u>Flow</u>	<u>T09</u>		
Lower Compl	<u>ANTELOPE RIDGE</u> <u>MURROW</u>	<u>GAS</u>	<u>Flow</u>	<u>T09</u>		

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:15 AM 12-3-96

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>10:15 AM 12-4-96</u>		
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>400</u>	<u>100</u>
Stabilized? (Yes or No).....	<u>yes</u>	<u>yes</u>
Maximum pressure during test.....	<u>400</u>	<u>100</u>
Minimum pressure during test.....	<u>400</u>	<u>100</u>
Pressure at conclusion of test.....	<u>400</u>	<u>100</u>
Pressure change during test (Maximum minus Minimum).....	<u>0</u>	<u>0</u>
Was pressure change an increase or a decrease?.....	<u>NA</u>	<u>NA</u>
Well closed at (hour, date): <u>10:15 AM 12/5/96</u>	Total Time On Production <u>24 hrs</u>	
Oil Production During Test: <u>0</u> bbls; Grav. <u>—</u>	Gas Production During Test <u>135</u> MCF; GOR <u>—</u>	
Remarks _____		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>NA / ATOKA is SI</u>		
Indicate by (X) the zone producing.....		
Pressure at beginning of test.....		
Stabilized? (Yes or No).....		
Maximum pressure during test.....		
Minimum pressure during test.....		
Pressure at conclusion of test.....		
Pressure change during test (Maximum minus Minimum).....		
Was pressure change an increase or a decrease?.....		
Well closed at (hour, date) _____	Total time on Production _____	
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	
Remarks <u>ATOKA SHUT IN</u>		

OPERATOR CERTIFICATE OF COMPLIANCE

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

AMOCO Production Company

Operator

C. L. Montanez

Signature

C. L. Montanez

Printed Name

E.T.

Title

12-5-96

Date

(505) 394-2219

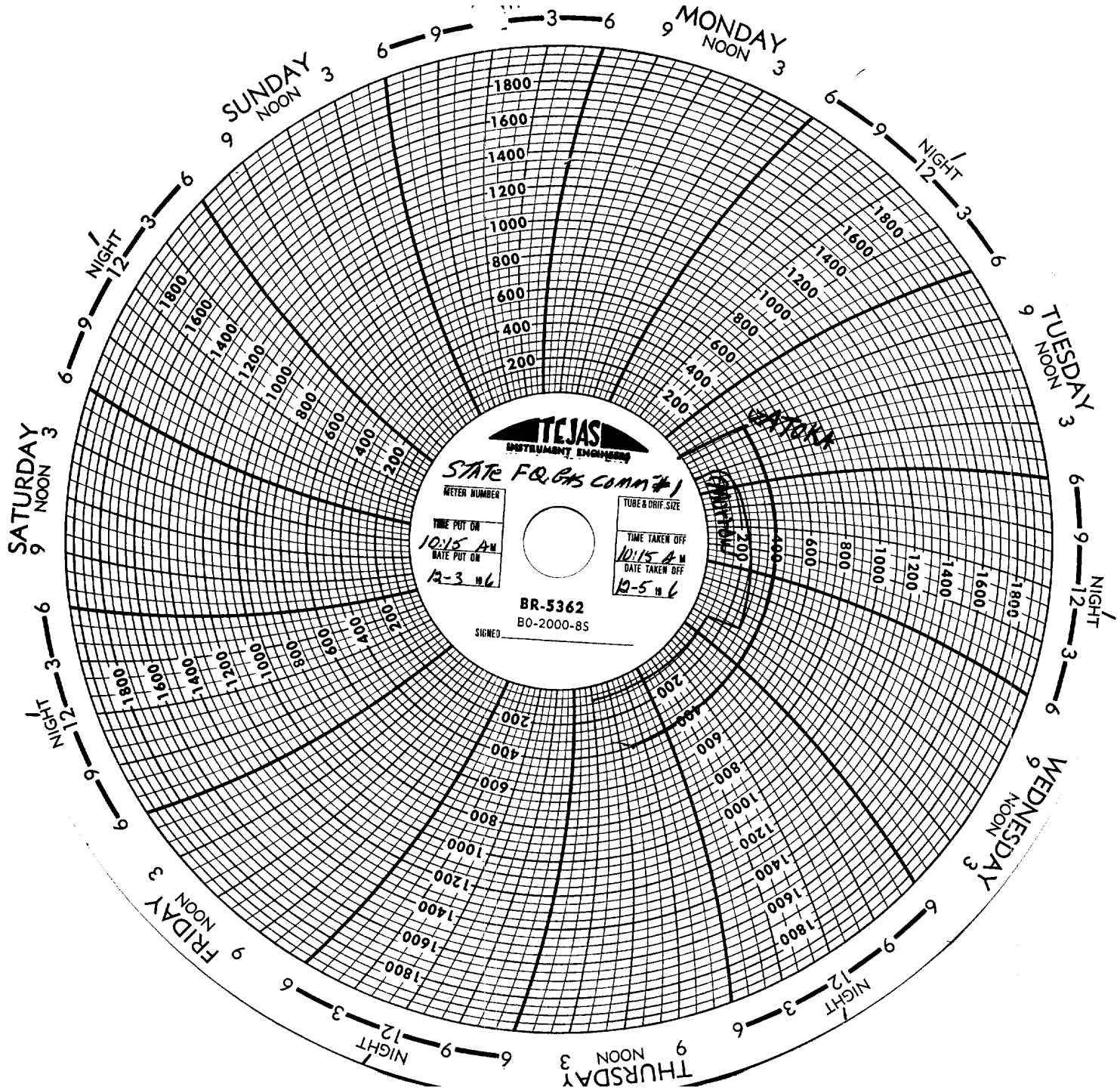
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 10 1996

By ORIGINAL SIGNATURE OF DIVISION

Title _____



Packer Leakage Test
STATE FQ GAS COMM #1

12-3-96 Shut in Morrow Zone
12-4-96 Open Morrow Zone
12-5-96 Unable to flow ATOKA Zone Test Complete

Test Started 12-3-96
Test Complete 12-5-96

Blue Pen - Morrow
Red Pen - ATOKA

District *Hebbs DC*
Regulatory Field *Antelope Ridge Municipal (CAS)*
Lease
Completion Zone *SATE FCD (CAS COMM)*

உயிர்நீர்

Submitted By L. J. McIntire

Checked By:

FLAC Well Horizon		
FLAC	Horiz Zone Sub	Chk Dig
933866	01	0

Control Number	Transaction Code	Test Data																		
		Date Test Started		Well Status		Type Test	Type Report	PRS Alloc	Hours Shut-In Prior To Test	Hours Produced Prior To Test	Length Of Test		Production While On Test			Avg Hrs Prod Per Day				
		Mo	Da	Yr	Kind						Cond.	Hours	Min	Oil Barrels	Water Barrels	Gas MCF	Hours	Min		
1		12	4	86	G	07					24	00		00		210		135	24	00

SIZES								
Choke 64ths	Tubing Size O.D.		Tubing I.D.		Casing Size I.D.		Injection String I.D.	
	In	16ths	In	16ths	In	16ths	In	16ths
19	20		21		22		23	

Pressures (PSIG)						
Separator	Line	Final Tubing	Initial Casing	Final Casing	Producing Bottom Hole	Shut-in Tubing
70	70	100	400	400		

Gas Lift Or Hydraulic Lift						
Gas Or Hydraulic Lift				Gas Lift Only		
An. Lift Substances	Injected Volume	Avg. Inj. Pressure	Type	Choke Edths	Cycle Time Minutes	Inj. Minutes Per Cycle
31	32	33	34	35	36	37

[illegible]

Oil-Cond	
Observed Gravity	Obs Temp
48	49

Calculated Data Items						
GOR Source	Formation GOR Cu Fv/Bbl	Input GFR MCF/Bbl	Gravity Corrected To 60 F Degrees	Percent Watercut	Water Gas Ratio	Volumetric Efficiency For Rod Pump

[illegible]

Schedule: Test Gas Measured or Estimated					
	Type Test	Jan	Feb	Mar	Apr
Control Number					
Transaction Code					
1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60
61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90
91	92	93	94	95	96
97	98	99	100	101	102
103	104	105	106	107	108
109	110	111	112	113	114
115	116	117	118	119	120
121	122	123	124	125	126
127	128	129	130	131	132
133	134	135	136	137	138
139	140	141	142	143	144
145	146	147	148	149	150
151	152	153	154	155	156
157	158	159	160	161	162
163	164	165	166	167	168
169	170	171	172	173	174
175	176	177	178	179	180
181	182	183	184	185	186
187	188	189	190	191	192
193	194	195	196	197	198
199	200	201	202	203	204
205	206	207	208	209	210
211	212	213	214	215	216
217	218	219	220	221	222
223	224	225	226	227	228
229	230	231	232	233	234
235	236	237	238	239	240
241	242	243	244	245	246
247	248	249	250	251	252
253	254	255	256	257	258
259	260	261	262	263	264
265	266	267	268	269	270
271	272	273	274	275	276
277	278	279	280	281	282
283	284	285	286	287	288
289	290	291	292	293	294
295	296	297	298	299	300
301	302	303	304	305	306
307	308	309	310	311	312
313	314	315	316	317	318
319	320	321	322	323	324
325	326	327	328	329	330
331	332	333	334	335	336
337	338	339	340	341	342
343	344	345	346	347	348
349	350	351	352	353	354
355	356	357	358	359	360
361	362	363	364	365	366
367	368	369	370	371	372
373	374	375	376	377	378
379	380	381	382	383	384
385	386	387	388	389	390
391	392	393	394	395	396
397</					

Schedule: Test Gas Not Measured or Estimated		Transaction Code	Control Number
Type	Test		
	Jan		
	Feb		
	Mar		
	Apr		
	May		
	Jun		
	Jul		
	Aug		
	Sep		
	Oct		

Transaction Code	Type Well Test Code	Type Well Test Report Code	Artificial Lift Substance Code	Type Gas Lift Code
1 = To Subtract	(See MC-2314)	(See MC-2315)	(See MC-2370)	(See MC-2316)
3 = To Add				
6 = To Change				

<u>GOR Source Code</u>	<u>PRS Allocation Flag</u>
(See MC-2371)	Y = Yes (Default)
	N = No

Remarks PICKER LEAKAGE TEST

District
Regulatory Field **ANNEKE Ridge**
Lease **STATE FIELDS**
Completion Zone **ATOKA**

001N36

FLAC Well Horizon		Home Zone	Sub	Dir
FLAC		02	9	

Submitted By

Checked

Control Number	Transaction Code	Test Data										Production While On Test		Avg Hrs Prod Per Day					
		Date Test Started	Mo	Da	Yr	Well Status	Kind	Cond.	Type Test	Type Report	PRS Alloc	Hours Shut-in Prior To Test	Hours Produced Prior To Test	Length Of Test	Oil Barrels	Water Barrels	Gas MCF	Hours	Min
1		12	3	96															

SIZES			
Choke 64ths	Tubing Size I.D.	Tubing Size I.D.	Casing Size I.D.
	In 16ths	In 16ths	In 16ths
19	20	21	22

PRESSURES (PSIG)			
Separator	Line	Final Tubing	Initial Casing
			Final Casing
			Producing Bottom Hole
			Shut-in Tubing
24	25	26	27

Gas Or Hydraulic Lift			
Art Lift Substance	Injected Volume	Avg Inj. Pressure	Type
			Choke 64ths
			Cycle Time Minutes
			Inj. Minutes Per Cycle
31	32	33	34

PUMP INFORMATION			
Strokes Per Minute	Stroke Length Inches	Pump Off Hours	Cycle Time For PD
		Min	Min
		Hours	Min
38	39	40	41

Oil-Cond	
Observed	Obs Temp
48	49

Calculated Data Items			
GOR Source	Formation GOR Cu Ft/Bbl	Input GFR Bbl	Gravity Corrected To 80 F Degrees
			Percent Watercut
			Water Gas Ratio
			Volumetric Efficiency For Rod Pump

Control Number	Transaction Code	Schedule: Test Filed with Reg. Agency													
		S	Type Test	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
5	3														
5	3														

Control Number	Transaction Code	Schedule: Test Gas Measured or Estimated												
		Type Test	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2		G												
1		G												

Control Number		Transaction Code		Schedule: Test Gas Not Measured or Estimated											
				Type Test	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
			T												