

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

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

Operator Exxon Corp.			Lease New Mexico 'S' State			Well No. 35	
Location of Well	Unit A	Sec. 2	Twp 22S	Rge 37E	County 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	ABO		OIL	Flow	Tubing	Open	
Lower Compl	Wantz Granite Wash		OIL	Pump	Tubing	Open	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 11:10 am 4-22-90

Well opened at (hour, date): 9:00 am 4-23-90

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	250	200
Stabilized? (Yes or No).....	NO	Yes
Maximum pressure during test.....	460	200
Minimum pressure during test.....	225	200
Pressure at conclusion of test.....	225	200
Pressure change during test (Maximum minus Minimum).....	235	0
Was pressure change an increase or a decrease?.....	decrease	---
Well closed at (hour, date): 10:00 am 4-24-90	Total Time On Production 25 hours	
Oil Production	Gas Production	
During Test: bbls; Grav.	During Test: MCF; GOR	
Remarks		

FLOW TEST NO. 2

Well opened at (hour, date): 2:00 pm 4-25-90

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	760	200
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	770	200
Minimum pressure during test.....	760	190
Pressure at conclusion of test.....	770	190
Pressure change during test (Maximum minus Minimum).....	10	10
Was pressure change an increase or a decrease?.....	increase	decrease
Well closed at (hour, date): 12:00 pm 4-26-90	Total time on Production 22 hours	
Oil production	Gas Production	
During Test: bbls; Grav.	During Test: MCF; GOR	
Remarks		

OPERATOR CERTIFICATE OF COMPLIANCE

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

Exxon Corp. P.O. Box 1600 Midland, TX

Operator 79702

Signature *Babette L. Taylor*

Babette L. Taylor Office Assistant

Printed Name Title

6-7-90 915 688-7556

Date Telephone No.

OIL CONSERVATION DIVISION
JUN 26 1990

Date Approved

By ORIGINAL SIGNED BY DISTRICT I SUPERVISOR

Title

RECEIVED

JUN 08 1990

CCC
HOBBS OFFICE