

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

OIL CONSERVATION DIVISION

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

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

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>MARATHON OIL COMPANY</u>		Lease <u>J.L. MURPHY</u>			Well No. <u>6</u>	
Location of Well	Unit <u>I</u>	Sec. <u>24</u>	Typ. <u>225</u>	Rge. <u>37E</u>	County <u>LEA</u>	
	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	<u>BLINERY</u>		<u>GAS</u>	<u>Flow</u>	<u>TBG</u>	
Lower Compl	<u>TUBB</u>		<u>OIL</u>	<u>ROD PUMP</u>	<u>TBG</u>	<u>—</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 10:30 AM - 10/19/92

Well opened at (hour, date): <u>— 10/20/92</u>	Upper Completion	Lower Completion
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): <u>— 10/21/92</u>	Total Time On Production	

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

Remarks FLOW TEST NO. 1 NOT PERFORMED - MASTER VALVE CLOSED THROUGHOUT.
FLOW TEST NO. 1 PERIOD.

FLOW TEST NO. 2		Upper Completion	Lower Completion
Well opened at (hour, date): <u>12:30 PM - 10/22/92</u>			<u>X</u>
Indicate by (X) the zone producing.....			
Pressure at beginning of test.....	<u>150</u>	<u>65</u>	
Stabilized? (Yes or No).....	<u>NO</u>	<u>YES</u>	
Maximum pressure during test.....	<u>165</u>	<u>65</u>	
Minimum pressure during test.....	<u>150</u>	<u>20</u>	
Pressure at conclusion of test.....	<u>165</u>	<u>20</u>	
Pressure change during test (Maximum minus Minimum).....	<u>15</u>	<u>45</u>	
Was pressure change an increase or a decrease?.....	<u>INCREASE</u>	<u>DECREASE</u>	

Well closed at (hour, date): 12:30 PM - 10/23/92 Total time on Production 24 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

MARATHON OIL COMPANY
Operator
Mike Greenough
Signature
MIKE GREENOUGH - ENG. TECH.
Printed Name Title

OIL CONSERVATION DIVISION
OCT 29 '92

Date Approved _____

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title _____

TUESDAY

9

12
10/20

3

6

9

12

3

6

9

WEDNESDAY
10/21

3

6

MARATHON Bu. COMPANY
1913 MARATHON 2 Bu. COMPANY
RED-7068 J. 800 MARATHON 2 Bu. COMPANY
10/19-23/92
Blue - Penetration

Flow Test No. 1

PA TEST SECTION

MA TEST SECTION

REMARKS
LOCATION
J. L. MURPHY #6
10/19/92
CHART PUT ON
TAKEN OFF

CHART NO. MC MP-1000-S

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

FRIDAY
10/23/92

9

3

6

9

12

3

6

9

12

3

SATURDAY

6

9

12

3

6

RECEIVED
COTR
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