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Appropriate Dist. Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Revised 1-1-89

INSTRUCTIONS ON REVERSE
SIDE

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
Northern New Mexico

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator <u>TEXACO Exploration & Prod. Inc.</u>		Lease <u>G.W. SIMS</u>		Well No. <u>1</u>	
Location of Well	Unit <u>B</u>	Soc. <u>9</u>	Twp <u>23 S</u>	Rge <u>37 E</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>TUBBS</u>	<u>GAS</u>	<u>FLOW</u>	<u>TBG</u>	<u>1"</u>
Lower Compl	<u>ABO DRINKARD</u>	<u>OIL</u>	<u>FLOW</u>	<u>TBG</u>	<u>1"</u>

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:30 4-28-97

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9:30 4-29-97</u>		
Indicate by (X) the zone producing.....	<u>X</u>	
Pressure at beginning of test.....	<u>560</u>	<u>600</u>
Stabilized? (Yes or No).....	<u>NO</u>	<u>NO</u>
Maximum pressure during test.....	<u>560</u>	<u>600</u>
Minimum pressure during test.....	<u>170</u>	<u>450</u>
Pressure at conclusion of test.....	<u>170</u>	<u>450</u>
Pressure change during test (Maximum minus Minimum).....	<u>390</u>	<u>150</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>DECREASE</u>
Well closed at (hour, date): <u>9:30 4-30-97</u>	Total Time On Production <u>24 Hrs</u>	
Oil Production During Test: <u>21</u> bbls; Grav. <u>41.0</u>	Gas Production During Test <u>379</u> MCF; GOR <u>18047</u>	

Remarks _____

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>5-1-97 9:30AM</u>		
Indicate by (X) the zone producing.....		<u>X</u>
Pressure at beginning of test.....	<u>590</u>	<u>615</u>
Stabilized? (Yes or No).....	<u>NO</u>	<u>NO</u>
Maximum pressure during test.....	<u>590</u>	<u>615</u>
Minimum pressure during test.....	<u>385</u>	<u>120</u>
Pressure at conclusion of test.....	<u>385</u>	<u>120</u>
Pressure change during test (Maximum minus Minimum).....	<u>205</u>	<u>495</u>
Was pressure change an increase or a decrease?.....	<u>DECREASE</u>	<u>DECREASE</u>
Well closed at (hour, date): <u>5-2-97</u>	Total time on Production <u>24 HRS</u>	
Oil production During Test: <u>33</u> bbls; Grav. <u>41.5</u>	Gas Production During Test <u>321</u> MCF; GOR <u>9728</u>	

Remarks _____

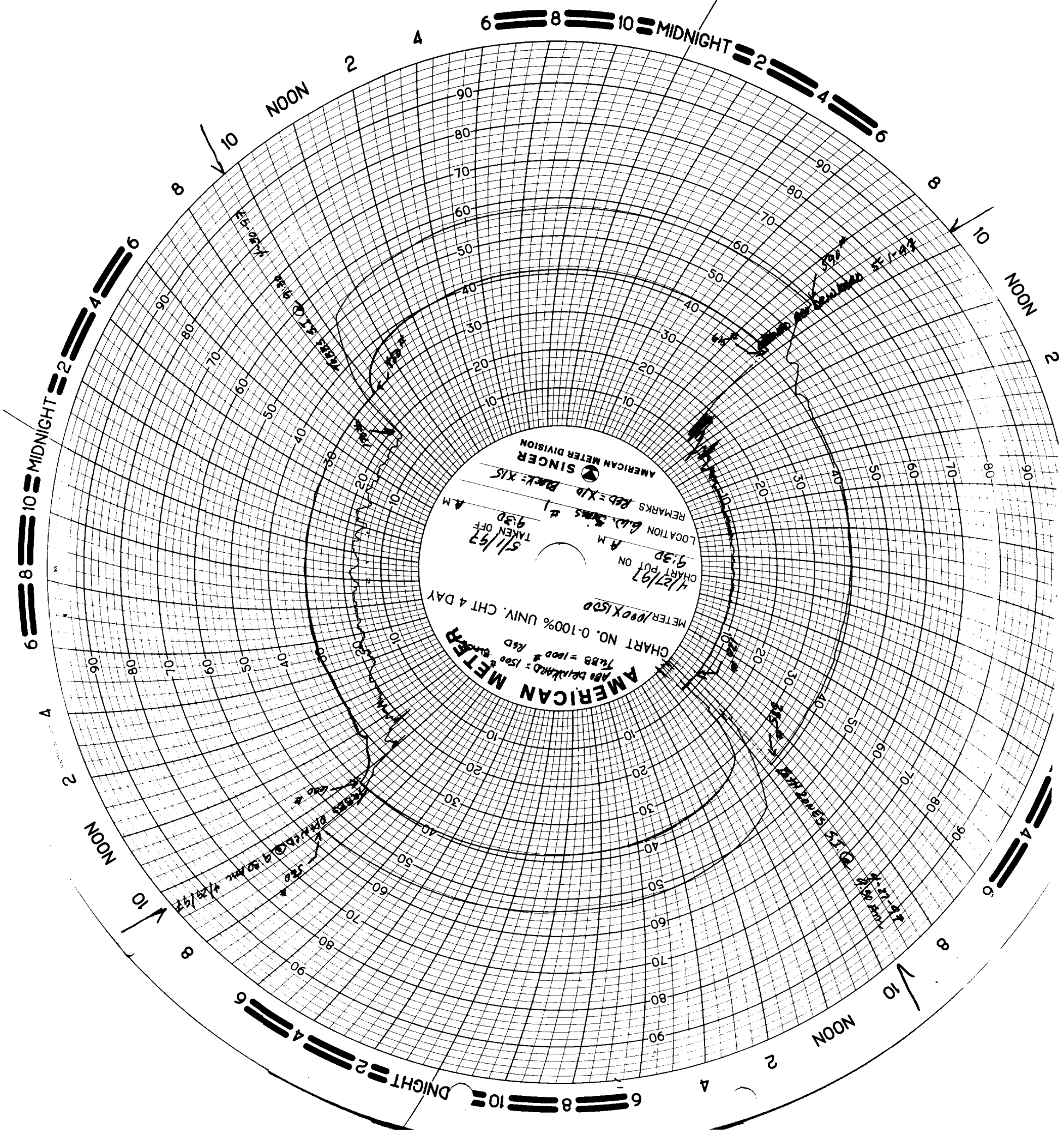
OPERATOR CERTIFICATE OF COMPLIANCE

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

TEXACO Exploration & Prod. Inc.
Operator
Augustine S. Veneqas
Signature
AUGUSTINE S. VENEQAS WELL TECH.
Printed Name Title
5/3/97 394-2585
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By _____
Title _____



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