

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

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

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

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Conoco			Jack A-21			#1
Operator McDonnold Operating, Inc.			Lease Langlie Jack Unit			Well No. 16
Location of Well	Unit M	Sec. 21	Twp 24S	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 Csg)	Choke Size
Upper Compl	Jalmat (Tansill-Yates-SR)		Gas	Flow	Tbg	None
Lower Compl	Langlie-Mattix-Sr-QN-GB		H <sub>2</sub> O Inj		Tbg	10/64

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 12:00 p.m. 3/20/96

	Upper Completion	Lower Completion
Well opened at (hour, date): 12:00 p.m. 3/21/96		
Indicate by ( X ) the zone producing.....	X	
Pressure at beginning of test.....	18 psi	450 psi
Stabilized? (Yes or No).....	yes	no
Maximum pressure during test.....	26 psi	450 psi
Minimum pressure during test.....	18 psi	vacuum
Pressure at conclusion of test.....	26 psi	vacuum
Pressure change during test (Maximum minus Minimum).....	8 psi	450 psi
Was pressure change an increase or a decrease?.....	increase	decrease
Well closed at (hour, date): 12:00 p.m. 3/20/96	Total Time On Production 24 hrs.	increase while inj pmp is running
Oil Production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	
Remarks <u>No evidence of communication</u>		

FLOW TEST NO. 2

Well opened at (hour, date): 12:00 p.m. 3/21/96	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....		X
Pressure at beginning of test.....	26 psi	0
Stabilized? (Yes or No).....	yes	yes
Maximum pressure during test.....	26 psi	2000 psi
Minimum pressure during test.....	20 psi	vacuum
Pressure at conclusion of test.....	20 psi	vacuum
Pressure change during test (Maximum minus Minimum).....	6 psi	2000 psi
Was pressure change an increase or a decrease?.....	decrease	increase
Well closed at (hour, date) 12:00 p.m. 3/20/96	Total time on Production 24 hrs.	while inj pmp running
Oil production During Test: _____ bbls; Grav. _____	Gas Production During Test _____ MCF; GOR _____	
Remarks <u>No evidence of communication. Well on vacuum except while injection pump is running.</u>		

OPERATOR CERTIFICATE OF COMPLIANCE

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

McDonnold Operating, Inc.

Operator

Craig M. McDonnold

Signature

Craig M. McDonnold President

Printed Name

Title

3/26/96

(915) 682-6396

Date

Telephone No.

OIL CONSERVATION DIVISION

Date Approved DISTRICT I SUPERVISOR

ORIGINAL SIGNED BY JERRY TEXTON

By DISTRICT I SUPERVISOR

APR 3 1996

Title \_\_\_\_\_

