

SOUTHEAST NEW MEXICO ZONE SEGREGATION TEST

Operator				Lease		Well	
TEXACO INC.				C.C. FRISTOE 'B' FEDERAL NCT-2		No. 7	
Location of Well	Unit	Sec	Twp	Rge	County		
	A	35	24s	37E	LEA		

FLOW TEST NO. 3

Well opened at (hour, date): _____

	1	2	3	4
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 _____	Gas Production _____			
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____			
Remarks _____				

FLOW TEST NO. 4

Well opened at (hour, date): _____

	1	2	3	4
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 _____	Gas Production _____			
During Test: _____ bbls; Grav. _____	During Test _____ MCF; GOR _____			
Remarks _____				

ANNUAL ZONE SEGREGATION TEST

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

Approved MAR 24 1986 19 _____
New Mexico Oil Conservation Commission
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
Title _____

Operator TEXACO INC
By W.B. Loh
Title District Operations Manager
Date 3-17-86