

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator UNION TEXAS PETROLEUM CORPORATION				Lease Blocker		Well No. 4	
Location of Well	Unit F	Sec 13	Twp 25-S	Rge 37-E	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	Justis (Blinebry)		Oil	Int. Flow	Tbg.	24/64	
Lower Compl	Justis (Tubb-Drinkard)		Oil	TA			

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 8 A.M., 2-15-71

Well opened at (hour, date): 8 A.M., 2-16-71

	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....	X	
Pressure at beginning of test.....	525	20
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	525	20
Minimum pressure during test.....	200	20
Pressure at conclusion of test.....	300	20
Pressure change during test (Maximum minus Minimum).....	-325	None
Was pressure change an increase or a decrease?.....	Decrease	
Well closed at (hour, date): 8 A.M., 2-17-71	Total Time On Production 24	
Oil Production	Gas Production	
During Test: 17 bbls; Grav. 39 ; During Test 332 MCF; GOR 19,529		
Remarks This well flows on intermitter 12-30 minute periods.		

FLOW TEST NO. 2

Well opened at (hour, date): 8 A.M., 2-18-71

	Upper Completion	Lower Completion
Indicate by ( X ) the zone producing.....		X
Pressure at beginning of test.....	500	25
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	550	25
Minimum pressure during test.....	500	25
Pressure at conclusion of test.....	550	25
Pressure change during test (Maximum minus Minimum).....	+ 50	None
Was pressure change an increase or a decrease?.....	Increase	
Well closed at (hour, date): 8 A.M., 2-19-71	Total time on Production 24	
Oil Production	Gas Production	
During Test: 0 bbls; Grav. 0 ; During Test 0 MCF; GOR		
Remarks Tubb-Drinkard Zone is TA.		

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

Approved APR 22 1971 19  
New Mexico Oil Conservation Commission

Operator UNION TEXAS PETROLEUM CORPORATION  
By [Signature]

By [Signature]  
Title SUPERVISOR DISTRICT

Title Well Test Supervisor  
Date April 12 1971

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ON CONSERVATION COMM.  
HOBBS, N. M.