

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator The Atlantic Refining Company			Lease Carlson Federal			Well No. 2		
Location of Well		Unit L	Sec 25	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 Blinsbry				Oil	Flow	Tbg.		12/64
Lower Compl Tubb-Drinkard				Oil	Flow	Tbg.		12/64

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 A.M. (MST) 12-19-60

Well opened at (hour, date):	<u>9:00 A.M. 12-20-60</u>	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		<u>X</u>	
Pressure at beginning of test.....		<u>1837</u>	<u>851</u>
Stabilized? (Yes or No).....		<u>Yes</u>	<u>No</u>
Maximum pressure during test.....		<u>1837</u>	<u>864</u>
Minimum pressure during test.....		<u>500</u>	<u>851</u>
Pressure at conclusion of test.....		<u>811</u>	<u>864</u>
Pressure change during test (Maximum minus Minimum).....		<u>1337</u>	<u>13</u>
Was pressure change an increase or a decrease?.....		<u>Decrease</u>	<u>Increase</u>
Well closed at (hour, date):	<u>9:00 A.M. 12-21-60</u>	Total Time On Production	<u>24 hrs.</u>
Oil Production		Gas Production	
During Test: <u>167</u> bbls; Grav. <u>37.6</u> ;	During Test <u>262</u> MCF; GOR <u>1566</u>		

Remarks _____

FLOW TEST NO. 2

Well opened at (hour, date):	<u>9:00 A.M. 12-22-60</u>	Upper Completion	Lower Completion
Indicate by (-X) the zone producing.....			<u>X</u>
Pressure at beginning of test.....		<u>1832</u>	<u>881</u>
Stabilized? (Yes or No).....		<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....		<u>1832</u>	<u>881</u>
Minimum pressure during test.....		<u>1829</u>	<u>578</u>
Pressure at conclusion of test.....		<u>1829</u>	<u>578</u>
Pressure change during test (Maximum minus Minimum).....		<u>3</u>	<u>303</u>
Was pressure change an increase or a decrease?.....		<u>Decrease</u>	<u>Decrease</u>
Well closed at (hour, date)	<u>9:00 A.M. 12-23-60</u>	Total time on Production	<u>24 hrs.</u>
Oil Production		Gas Production	
During Test: <u>74</u> bbls; Grav. <u>36.4</u> ;	During Test <u>165</u> MCF; GOR <u>2239</u>		

Remarks _____

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

Approved _____ 19 _____
New Mexico Oil Conservation Commission

Operator The Atlantic Refining Company
By N. A. Carr
Title District Superintendent
Date _____

INSTRUCTIONS

4. Following completion of Zone Test No. 1, the well shall again be shut-in in accordance with Paragraph 3 above.
5. Flow Test No. 2 shall be conducted when there is a leak zone indicated during Zone Test No. 1. Production for Flow Test No. 2 shall be the same as for Flow Test No. 1 except that the previously produced zone shall remain shut-in while the previously shut-in zone is produced.
6. All pressures, throughout the entire test shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked with a deadweight tester at least twice, once at the beginning and once at the end of each flow test.
7. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the appropriate District Office of the New Mexico Oil Conservation Commission on Southeast New Mexico Packer Leakage Test Form Revised 1-1-58, together with the original pressure recording gauge charts with all the deadweight pressures which were taken indicated thereon. In lieu of filing the aforesaid charts, the operator may construct a pressure versus time curve for each zone of each test, indicating thereon all pressure changes which may be reflected by the gauge charts as well as all deadweight pressure readings which were taken. If the pressure curve is submitted, the original chart must be permanently filed in the operator's office. Form C-116 shall also accompany the Packer Leakage Test Form when the test period coincides with a gas-oil ratio test period.

