

This form is not to be used for reporting packer leakage tests in Northwest New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator TEXACO INC.			Lease C.C. FRISTOE 'B' FED. NCT-1			Well No. 2	
Location of Well	Unit M	Sec 26	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	JUSTIS BLINEBRY		OIL	ART. LIFT	Csg.	~	
Lower Compl	JUSTIS TUBB-DRINKARD		~	* SHUT IN.	Csg.	~	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 7:30 AM 3-10-80

Well opened at (hour, date): 7:30 AM 3-11-80

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....	<u>X</u>	_____
Pressure at beginning of test.....	<u>15</u>	<u>1160</u>
Stabilized? (Yes or No).....	<u>Yes</u>	<u>Yes</u>
Maximum pressure during test.....	<u>15</u>	<u>1160</u>
Minimum pressure during test.....	<u>15</u>	<u>1160</u>
Pressure at conclusion of test.....	<u>15</u>	<u>1160</u>
Pressure change during test (Maximum minus Minimum).....	<u>-0-</u>	<u>-0-</u>
Was pressure change an increase or a decrease?.....	<u>NEITHER</u>	<u>NEITHER</u>

Well closed at (hour, date): 1:00 PM 3-11-80 Total Time On Production 5 1/2 HRS.

Oil Production _____ Gas Production _____

During Test: 1 bbls; Grav. 37.1; During Test 3 MCF; GOR 3000

Remarks _____

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): _____	_____	_____
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 * JUSTIS TUBB-DRINKARD ASD 5-14-70

ANNUAL ZONE SEGREGATION TEST

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

Approved APR 1 1980 19 _____
New Mexico Oil Conservation Commission

By _____ Operator TEXACO INC.

By _____ Title ASST. DIST. SUPERINTENDENT

Title _____ Date 3-27-80

OIL CONSERVATION DIV.

MAR 27 '80

RECEIVED

PRINTED IN U.S.A.

7 A.M. 8

9 A.M.

10 A.M.

11 A.M.

12 NOON

1 P.M.

DRINKARD ST
1160 PSI

BLINERY ST
15 PSI

**CALIBRATED
CHARTS**
BATAVIA
N.Y.

METER NUMBER
TIME PUT ON
DATE PUT ON M
19

TUBE & ORIF. SIZE
TIME TAKEN OFF
DATE TAKEN OFF M
19

NOTED
MW-MP 2000

SIGNED C. FRISTDE B
WELL #2

TEXACO INC.

WELL C.C. FRISTDE 'B' NCT-1 No. 2

POOD: BLINERY, DRINKARD

DATE ON 3-10-80 OFF 3-11-80

CHARM NO. 2

7 A.M.

10 P.M.

10 P.M.

9 P.M.

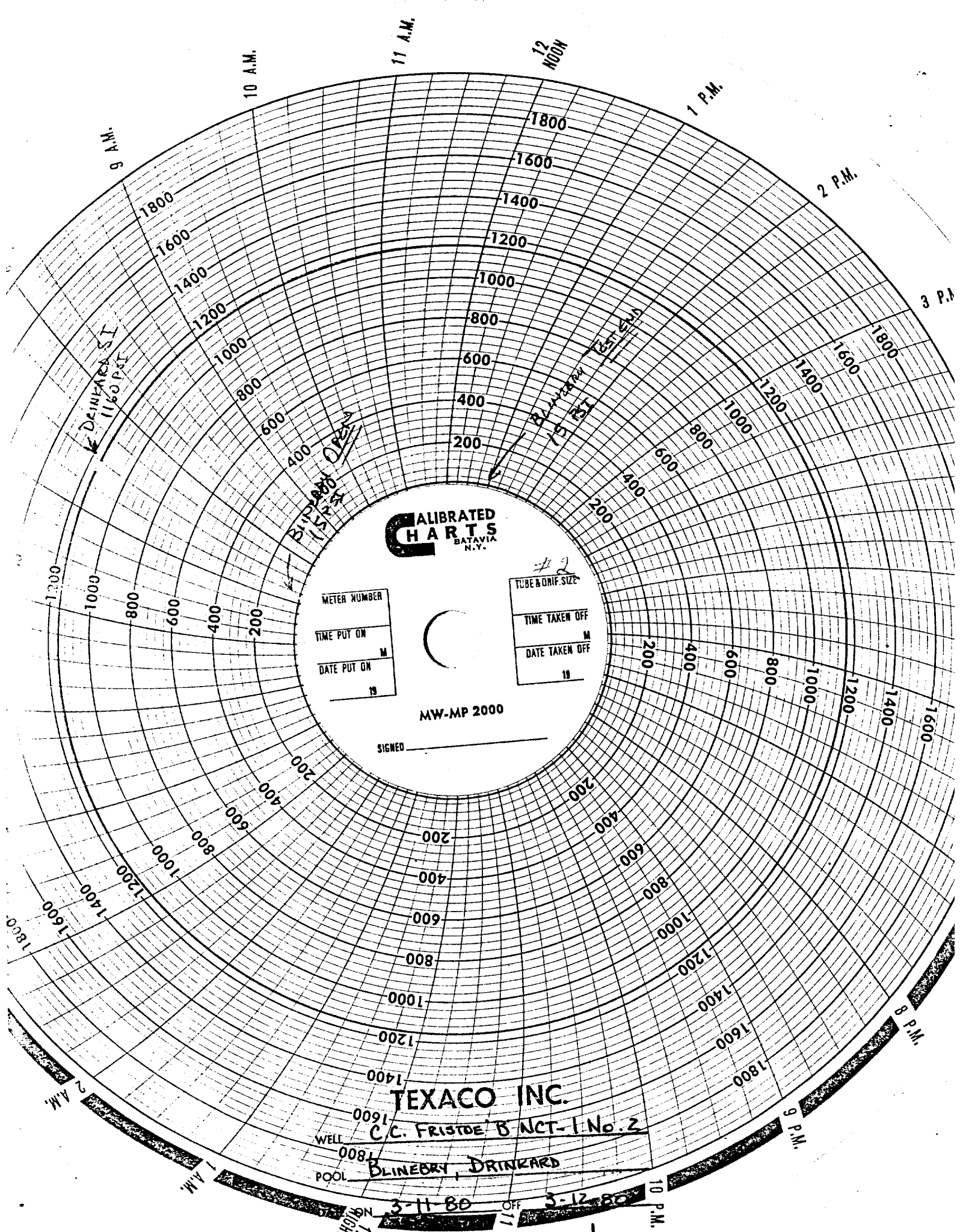
8 P.M.

7 P.M.

OIL CONSERVATION DIV.

MAR 27 '80

RECEIVED



**CALIBRATED
CHARTS**
BATAVIA
N.Y.

METER NUMBER
TIME PUT ON
DATE PUT ON

#2
TUBE & ORIF. SIZE
TIME TAKEN OFF
DATE TAKEN OFF

MW-MP 2000

SIGNED _____

TEXACO INC.

WELL C.C. FRISTOE B NCT-1 No. 2

POOL BLINEBY, DRINKARD

ON 3-11-80 OFF 3-12-80

CHART NO. 2 OF 2 MULTIPLY, PSI X 1

9 A.M.
10 A.M.
11 A.M.
12 NOON
1 P.M.
2 P.M.
3 P.M.
4 P.M.
5 P.M.
6 P.M.
7 P.M.
8 P.M.
9 P.M.
10 P.M.

1800
1600
1400
1200
1000
800
600
400
200

DEINKARD ST
1150 PSI

BLINEBY ST
1150 PSI

1800
1600
1400
1200
1000
800
600
400
200

1800
1600
1400
1200
1000
800
600
400
200

1800
1600
1400
1200
1000
800
600
400
200

1 P.M.
2 P.M.
3 P.M.
4 P.M.
5 P.M.
6 P.M.
7 P.M.
8 P.M.
9 P.M.
10 P.M.

OIL CONSERVATION DIV.

MAR 27 '80

RECEIVED