

OR TEXACO PRODUCING INC (LOWER ZONE)		Lease MYRES LANGLE MATIX UNIT		Well 172	
SUN EXPLORATION & PROD. (UPPER ZONE)		COURTLAND MYERS		No. 1	
Location	Unit	Sec	Twp	Rge	County
Well	J	6	24s	37E	LEA
Name of Reservoir or Pool		Type of Prod (Oil or Gas)	Method of Prod Flow, Art Lift	Prod. Medium (The or Gas)	Choke Size
Upper Compl	JALMAT *	GAS	Flow	Csg	~
Lower Compl	LANGLIE MATIX	OIL	ART LIFT	TBA	~

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 AM 2-23-87

Well opened at (hour, date): 9:00 AM 2-24-87

	Upper Completion	Lower Completion
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	0	80
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	0	80
Minimum pressure during test.....	0	40
Pressure at conclusion of test.....	0	40
Pressure change during test (Maximum minus Minimum).....	NONE	-40
Was pressure change an increase or a decrease?.....	NEITHER	DECREASE

Well closed at (hour, date): _____

Oil Production _____ Gas Production _____

During Test: 3 bbls; Grav. 38⁸; During Test 3 MCF; GOR 1000

Remarks _____

* UPPER ZONE TEMPORARILY ABANDON

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): _____

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 JUN 12 1987
New Mexico Oil Conservation Commission

By _____
Title DISTRICT 1 SUPERVISOR

Operator TEXACO INC.

By _____
Title AREA SUPERINTENDENT

Date JUN 11 1987

RECEIVED
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OCD
HOBBS OFFICE

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