

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

COMPANY The Atlantic Refining Company Box 1038 Denver City, Texas
(Address)

LEASE State "T" WELL NO. 5 UNIT X 6 2 T 15-S R 37-E
DATE WORK PERFORMED 12-2-58 POOL Denton (Wolfcamp)

This is a Report of: (Check appropriate block) ☐ Results of Test of Casing Shut-off
☐ Beginning Drilling Operations ☐ Remedial Work
☐ Plugging ☒ Other Acidize

Detailed account of work done, nature and quantity of materials used and results obtained.

Pulled 2" tubing. Removed pump cavity and re-ran tubing. Set seals in Baker 415B Packer @ 9075' w/bottom of tail pipe @ 9137. RU BJ Service & acidize perf. 9126-78 w/5000 gals. 15% LSTNE acid. Max. Press. 2100; Min. Press. vacuum. Pumped in @ 10 BPM; Flushed w/60 BLO. Tubing on vacuum as soon as job completed. Pulled tubing. Removed tail pipe & installed pump cavity & re-ran as pulled. Started circ. to clean up. RDPV On 20 hr test pmpd 150 BO on 70/18 SPM. Pump operating @ 1500#. GOR 185. Submitted test to Commission for increase in allowable from 75 to 127 (top).

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

Original Well Data:

DF Elev. _____ TD _____ PBD _____ Prod. Int. _____ Compl Date _____
Tbng. Dia _____ Tbng Depth _____ Oil String Dia _____ Oil String Depth _____
Perf Interval (s) _____
Open Hole Interval _____ Producing Formation (s) _____

RESULTS OF WORKOVER:

BEFORE

AFTER

Date of Test	_____	_____
Oil Production, bbls. per day	_____	_____
Gas Production, Mcf per day	_____	_____
Water Production, bbls. per day	_____	_____
Gas-Oil Ratio, cu. ft. per bbl.	_____	_____
Gas Well Potential, Mcf per day	_____	_____
Witnessed by _____	_____	_____

(Company)

OIL CONSERVATION COMMISSION

Name [Signature]
Title _____
Date _____

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

Name [Signature] N.A. Carr 12-12-58
Position District Superintendent
Com. The Atlantic Refining Company