

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**Santa Fe, New Mexico**

**MISCELLANEOUS REPORTS ON WELLS**

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See additional instructions in the Rules and Regulations of the Commission.

Indicate Nature of Report by Checking Below

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON REPAIRING <del>XXXX</del> Leaks	<b>X</b>
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON (Other)	

**December 7, 1954**      **Midland, Texas**  
 (Date) (Place)

Following is a report on the work done and the results obtained under the heading noted above at the

**The Texas Company**      **State of New Mexico "K"**  
 (Company or Operator) (Lease)  
**J.P. (Bum) Gibbins**      Well No. **2** in the **NE** ¼ **SE** ¼ of Sec. **18**  
 (Contractor)  
**T.19-S, R.37-E, NMPM, Monument**      Pool, **Lea**      County.

The Dates of this work were as follows: **November 13, 1954 through November 30, 1954**

Notice of intention to do the work (was) ~~XXXX~~ submitted on Form C-102 on **November 12**, 19**54**,  
 (Cross out incorrect words)  
 and approval of the proposed plan (was) ~~XXXX~~ obtained.

**DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED**  
**TD: 4020' - Line**

**7" casing set at 3887'.**  
**Ran and cement 118' joints 3890' of 4½" at 3900' with 550 sacks.**  
**Cement circulated. Tested casing with 1000#. Tested okay.**  
**On test ending December 1, 1954 well flowed 48 bbls. of oil and 3 bbls.**  
**of water through a 14/64" choke in 12 hours.**

Witnessed by.....  
 (Name) (Company) (Title)

Approved:

**OIL CONSERVATION COMMISSION**

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

Name **[Signature]**

Position **Asst. Dist. Supt.**

Representing **The Texas Company**

Address **Box 1270-Midland, Texas**

(Title)

(Date)