

NEW MEXICO OIL CONSERVATION COMMISSION

MISCELLANEOUS REPORTS ON WELLS

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

COMPANY The Texas Company, P.O. Box 458, Hobbs, New Mexico  
(Address)

LEASE State of N.M. "AN" WELL NO. 5 UNIT I S 22 T 14-S R 33-E

DATE WORK PERFORMED 8-28-58 POOL Saunders

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

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

TD-4112'  
13 3/8" OD Casing Set @ 364'

Ran 4155' @ 5/8" OD Casing Set @ 4169' and cemented with 2200 sacks 4% and 200 sacks neat cement by Howco, 8-27-58. Cement Circulated.

Tested @ 5/8" OD Casing with 1000 PSI for 30 minutes from 9:15 to 9:45 P.M. 8-28-58. Tested OK. Drilled cement and plug and retested with 1000 PSI for 30 minutes from 10:15 to 10:45 P.M. 8-28-58. Tested OK.

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

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

Name [Signature]  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Name [Signature]  
Position Field Foreman  
Company The Texas Company