

NEW MEXICO OIL CONSERVATION COMMISSION
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Sinclair Oil & Gas Company, 520 East Broadway, Hobbs, New Mexico
(Address)

LEASE State Lea 6010 WELL NO. 2 UNIT N S 36 T 19 R 37
DATE WORK PERFORMED As Shown POOL Undesignated

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

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

- 5-12-57: Perforated 5 1/2" OD casing from 3884-3890' with 4 Jet shots per ft.
- 5-13-57: Sand-oil fractured with 10,000 gal. & 4,600#, thru perforations. Max. press. 4500#, Min. press. 4200#, Inj. rate 13.7 bbl. per min.
- 5-20-57: Perforated 2/3850-3856 & 3862-3874' with 4 Jet shots per ft.
- 5-21-57: Set Baker Retrivable Bridging plug at 3880'. Acidized with 500 gal. mud. Max. press. 3600#. Min. press. 3300#. Inj. rate 3.8 bbl. per min. Fractured with 20,000# and 20,000 gal.
- 5-22-57: Sand-oil fractured with 10,000 gal. oil and 2950# sand. Max. press. 4600#. Min. press. 4100#. Injection rate 16 bbl. per min.
- 5-27-57: Pulled tubing and Retrivable Retainer. Ran 2" tubing to 3893'.
- 5-28-57: 3920'-PB, Queen. Flowed 72 bbl. oil in 24 hrs. thru 20/64" choke. Gravity 37, GOR-757, Tbg. press. 15#, Csg. press. 150#, (Completed as an oil well 5-28-57, Top allowable of 40 bbl. per calendar day.

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 R. E. Montgomery
Title REGIONAL MANAGER
Date _____

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

Name [Signature]
Position District Supt.
Company Sinclair Oil & Gas Company

Orig. & 2cc:OCC
cc:State Land Office, Santa Fe, N.M.
cc:FHR, HFD, File

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