

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

NOBBS OFFICE 600

MISCELLANEOUS REPORTS ON WELLS

1955 APR 12 PM 1:13

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 WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON Acidizing (Other) Perforating	<b>X</b>

April 11, 1955  
(Date)

Midland, Texas  
(Place)

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

**The Texas Company**

(Company or Operator)

**Texas-Gulf-State Lea**

(Lease)

**McVay & Stafford**

(Contractor)

Well No. **2** in the **SE** 1/4 **NE** 1/4 of Sec. **28**

T. **10-S**, R. **37-E**, NMPM, **Echols Devonian North** Pool, **Lea** County.

The Dates of this work were as follows: **See Below**

Notice of intention to do the work ~~was~~ (was not) submitted on Form C-102 on....., 19.....  
(Cross out incorrect words)

and approval of the proposed plan ~~was~~ (was not) obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

TD: 11887' PB: 11886'  
5 1/2" casing set at 11887'

Perforated 5 1/2" casing 11865'-11870' with 4 Jet shots per foot, completed 10:15 A.M. 4-6-55.

Washed perforations with 500 gallons 15% regular acid, completed 1:30 P.M. 4-6-55.

Washed perforations with 500 gallons 15% regular acid, completed 4:20 P.M. 4-7-55. Swabbed 65 bbls fluid in 10 hrs.

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

Approved: OIL CONSERVATION COMMISSION

*S. J. Stanley*  
(Name)

(Title)

(Date)

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

Name.....

Position..... **Asst. Dist. Supt.**

Representing..... **The Texas Company**

Address..... **Box 1270, Midland, Texas**