

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 2-55)

MISCELLANEOUS REPORTS ON WELLS JOBBED BY OCC

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

Name of Company Graridge Corporation		Address Box 334, Caprock, New Mexico				
Lease Cap Unit #1	Well No. 7-10	Unit Letter J	Section 7	Township 13S	Range 32E	
Date Work Performed	Pool Caprock Queen			County Lea		

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations ☐ Casing Test and Cement Job ☐ Other (Explain):
☐ Plugging ☒ Remedial Work

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

- 4-4-61** Rig up & clean out to TD 3067'.
4-6-61 Ran radioactive tracer. Water entering thief zone at 3040'.
braced head squeeze down 5 1/2" casing with 200 sacks cement. Max.
press. 1100 psi. Closed in 1100 psi. WOC. Tested - pump in at
700 psi. Displaced 250 sacks cement to 2900'. WOC. Drilled out
to 2950' and tested to 1000 psi. - OK. Drilled to 3030' found
red bed caving. Cleaned out to 3067'. Ran 184' of 3 1/2" 9.2# Hydril
liner. Set at 3067' and cemented with 175 sacks. WOC. Pump in
at 500 psi.
4-13-61 Cement top of liner with 150 sacks. Max. press. 1700 psi. Closed
in at 1100 psi. Drilled cement 2830' to 2877'. Tested to 1000 psi.
Held OK. Cleaned out to 3067'. Test 1000 psi. OK. Ran Gamma Ray.
Sand jet perforated 3053' to 3060' with 2 holes per foot.
4-18-61 Placed well on injection.
- W J K - 25*

Witnessed by B. I. Miller	Position Engineer	Company Graridge Corporation
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter		Tubing Depth	Oil String Diameter	Oil String Depth
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

Approved by <i>[Signature]</i>	Name <i>[Signature]</i>
Title	Position B. I. Miller
Date	Company Graridge Corporation

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