

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Continental Oil Company, Box 427, Hobbs, New Mexico  
(Address)

LEASE State U-15 No. WELL NO. 2 UNIT D S 15 T 17S R 29E  
DATE WORK PERFORMED 6-20-58 POOL Undesignated Sq. Lake

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.

Well spudded at 6:30 PM 6-19-58. Ran 19 jts 7 5/8" 24# casing. Set at 753'  
with 350 sacks regular neat cement. Plug down at 2:00 PM 6-20-58.

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 M. L. Armstrong  
Title \_\_\_\_\_  
Date \_\_\_\_\_

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

Name Frank J. Sevens  
Position District Superintendent  
Company Continental Oil Company

OIL CONSERVATION COMMISSION	
ARIZONA DISTRICT OFFICE	
IN COMPLIANCE WITH	
UNITED STATES	
DATE	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
TELEPHONE	
TELETYPE	
FAX	
EMAIL	
WEB	
OTHER	