

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS

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

COMPANY Southwestern, Inc. Box 1116, Lovington, New Mexico  
(Address)

LEASE DeKalb -Federal WELL NO. 5 UNIT D S 5 T 17 S R 30E

DATE WORK PERFORMED Feb. 3, 1959 POOL West Square Lake-Grayburg-San Andre (Ext.)

This is a Report of: (Check appropriate block)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Results of Test of Casing Shut-off
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work
	<input checked="" type="checkbox"/> Other _____

Detailed account of work done, nature and quantity of materials used and results obtained.  
405 ft. of 10 3/4" 38 lb. casing set and muddied. To be pulled after 8 5/8" surface casing is run and cemented.

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

Name J J Hallis  
Position President  
Company Southwestern, Inc.