

**DUPLICATE**

NEW MEXICO OIL CONSERVATION COMMISSION  
MISCELLANEOUS REPORTS ON WELLS  
(Submit to appropriate District Office as per Commission Rule 1106)

Company Sunray Mid-Continent Oil Company Box 126 Hobbs, New Mexico  
(Address)

Lease New Mexico State F Well No. 2 Unit C S 1 T 10S R 33E

Date work performed 2-10-56 POOL Undesignated

This is a Report of (Check appropriate block) ☒ Result 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.

Drilled 12 1/4" hole to 4025. Set 9 5/8 casing 36# J-55 and cemented with Single Plug Method with 1700 sacks common cement with 6% gel. And 200 sacks Neat. Used float collar and guide shoe. Cement circulated. Completed 2:30 P.M.

Tested casing with 1000# Pump Pressure for one hour. Casing tested o.k.

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	I hereby certify that the information given above is true and complete to the best of my knowledge.
Name <u>C. M. Kuebler</u>	Name <u>E. E. Kennedy</u>
Title <u>Engineer District 1</u>	Position <u>E.E. Kennedy Hobbs Area Group Foreman</u>
Date <u>FEB 17 1956</u>	Company <u>Sunray Mid-Continent Oil Company</u>